

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

SECRETARY OF THE SENATE

03 APR 16 AM 10:26

Office Use Only

1. NAME OF COMMITTEE (in full)  USE FEC MAILING LABEL OR TYPE OR PRINT ▼ Example: If typing, type over the lines.

PAT ROBERTS FOR SENATE

PO BOX 433

ADDRESS (number and street)  Check if different than previously reported. (ACC)

GREAT BEND KS 67530

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT

C00128876  IS THIS REPORT NEW (N) OR  AMENDED (A) KS

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:  April 15 Quarterly Report (Q1)  July 15 Quarterly Report (Q2)  October 15 Quarterly Report (Q3)  January 31 Year-End Report (YE)  July 31 Mid-Year Report (Non-election Year Only) (MY)  Termination Report (TER)

(b) 12-Day PRE- Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  Convention (12C)  Special (12S)

Election on  M M /  D D /  Y Y Y Y Y Y in the State of

(b) 30-Day Post- Election Report for the:  General (30G)  Runoff (30R)  Special (30S)

Election on  M M /  D D /  Y Y Y Y Y Y 0 in the State of

5. Covering Period  M M /  D D /  Y Y Y Y Y Y 2008 through  M M /  D D /  Y Y Y Y Y Y 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer ROBERT A. PARRISH, (RICHARD A. BALL ASSIST. TREAS)

Signature of Treasurer *Richard A. Ball* Date  M M /  D D /  Y Y Y Y Y Y 2008

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

**FEC FORM 3**  
(Revised 02/2003)

28020180601

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

PAT ROBERTS FOR SENATE

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ...	496547.50	3334482.43
(b) Total Contribution Refunds (from Line 20(d)) .....	500.00	7630.90
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	496047.50	3326851.53
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	265730.29	1419679.51
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	7000.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	265730.29	1412679.51
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<b>2986794.20</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0.00</b>	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

28020180602

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name

PAT ROBERTS FOR SENATE

Report Covering the Period: From: 

M	M
01	01

 / 

D	D
01	01

 / 

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
03	31

 / 

D	D
03	31

 / 

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	246885.00	
(ii) Unitemized .....	19312.50	
(iii) TOTAL of contributions from individuals .....	266197.50	1651106.04
(b) Political Party Committees .....	2500.00	7658.00
(c) Other Political Committees (such as PACs) .....	227850.00	1675718.39
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	496547.50	3334482.43
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	<b>4600.00</b>	<b>515637.91</b>
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate .....	0.00	0.00
(b) All Other Loans .....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)) .....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	<b>0.00</b>	<b>7000.00</b>
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	<b>20877.43</b>	<b>117244.58</b>
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) .....</b>	<b>522024.93</b>	<b>3974364.92</b>

28020180603

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES .....	265730.29	1419679.51
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	95140.32
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate .....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (such as PACs) .....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	500.00	4500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	3130.90
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)) .....	500.00	7630.90
21. OTHER DISBURSEMENTS .....	0.00	39535.58
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	266230.29	1561986.31

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....	2730999.56
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3) .....	522024.93
25. SUBTOTAL (add Line 23 and Line 24) .....	3253024.49
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) .....	266230.29
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) .....	2986794.20

28020180604

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 116

11a  11b  11c  11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

**A. Likes, Thomas D.**

Mailing Address

5811 SW 38th St.

City

Topeka

State

KS

Zip Code

66610

FEC ID number of contributing federal political committee.

C

Name of Employer

Kansas Livestock Association

Occupation

Executive V.P.

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

01 / 10 / 2008

Transaction ID: C-3229-01CA05

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. Allen, Maxine B.**

Mailing Address

9606 West 95th Street

City

Overland Park

State

KS

Zip Code

66212

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

1025.00

Date of Receipt

01 / 23 / 2008

Transaction ID: C-95-03Xf01

Amount of Each Receipt this Period

25.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Campbell, J. Robert**

Mailing Address

432 N. 8TH Street

City

Sterling

State

KS

Zip Code

67579

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

01 / 23 / 2008

Transaction ID: C-992-02Rp04

Amount of Each Receipt this Period

100.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

1125.00

TOTAL This Period (last page this line number only) .....

1125.00

28020180605

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Fager E., Emery E.</b>		Date of Receipt MM / DD / YYYY <b>01 / 23 / 2008</b>
Mailing Address <b>1203 SW 29th</b>		Transaction ID: <b>C-1798-01Ac0C</b>
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66611</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>Core Bank &amp; Trust</b>	Occupation <b>Banker</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>4500.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Lair, Mary Alice</b>		Date of Receipt MM / DD / YYYY <b>01 / 23 / 2008</b>
Mailing Address <b>250 N. County Club Rd.</b>		Transaction ID: <b>C-3101-03Xb01</b>
City <b>Chanute</b>	State <b>KS</b>	Zip Code <b>66720</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>75.00</b>
Name of Employer <b>Self-Employed</b>	Occupation <b>Homemaker</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>325.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Lynch, Dorothy W.</b>		Date of Receipt MM / DD / YYYY <b>01 / 23 / 2008</b>
Mailing Address <b>26695 W Greentree Ct</b>		Transaction ID: <b>C-3315-01ax02</b>
City <b>Olathe</b>	State <b>KS</b>	Zip Code <b>66061</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100.00</b>
Name of Employer <b>None</b>	Occupation <b>Retired</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>600.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1175.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>2300.00</b>

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. McKenzie, Carissa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 29584 Old K4 Road  
 City: Alta Vista State: KS Zip Code: 66834  
 Date of Receipt: 01 / 23 / 2008  
 Transaction ID: C-3502-01vc06  
 Amount of Each Receipt this Period: 50.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Horse Creek Ranch Occupation: Rancher  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 650.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

**B. Morse, Patrick L.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 2003 Circle Lake Dr.  
 City: Dodge City State: KS Zip Code: 67801  
 Date of Receipt: 01 / 23 / 2008  
 Transaction ID: C-3744-015c0E  
 Amount of Each Receipt this Period: 250.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Fairpoint Occupation: Management  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 350.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

**C. Murphy, J. Kevin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 2 Westboro Pl  
 City: Topeka State: KS Zip Code: 66604  
 Date of Receipt: 01 / 23 / 2008  
 Transaction ID: C-3806-03EL02  
 Amount of Each Receipt this Period: 500.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: None Occupation: Retired  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 750.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

**SUBTOTAL** of Receipts This Page (optional) ..... 800.00  
**TOTAL** This Period (last page this line number only) ..... 3100.00

28020180607



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. Wheatcroft, Marcia**

Mailing Address  
3806 Quail Ridge Dr.

City State Zip Code  
Winfield KS 67156

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Self-Employed

Occupation  
Restaurant Owner

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
550.00

Date of Receipt  
MM / DD / YYYY  
01 / 23 / 2008

Transaction ID: C-5729-03Fk02

Amount of Each Receipt this Period  
50.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. Cauble, Sally**

Mailing Address  
530 Lilac

City State Zip Code  
Liberal KS 67901

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Dr. Davis

Occupation  
Optometrist

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
575.00

Date of Receipt  
MM / DD / YYYY  
01 / 30 / 2008

Transaction ID: C-1057-03IZ02

Amount of Each Receipt this Period  
75.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. Cox, Kenya**

Mailing Address  
2745 N. Fountain

City State Zip Code  
Wichita KS 67200

FEC ID number of contributing federal political committee. **C**

Name of Employer  
KS Rep. Todd Tiahrt

Occupation  
District Liaison

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
275.00

Date of Receipt  
MM / DD / YYYY  
01 / 30 / 2008

Transaction ID: C-1305-03Xv01

Amount of Each Receipt this Period  
25.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 150.00

TOTAL This Period (last page this line number only) ..... 3475.00

28020180609

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	<input type="checkbox"/>	15
	12		13a		13b		14			

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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

C00128876

Full Name (Last, First, Middle Initial)

**A. Laws, Judith**

Mailing Address

4512 SW Moundview Drive

City

Topeka

State

KS

Zip Code

66610

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State Farm Insurance Co.

Occupation

Agency Field Executive

Receipt For:

Primary

General

Other (specify): ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
01 / 30 / 2008

Transaction ID: C-3155-03Y601

Amount of Each Receipt this Period

150.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. Lewis, David**

Mailing Address

3313 SW Clarhan Road

City

Topeka

State

KS

Zip Code

66614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Real Estate Development

Receipt For:

Primary

General

Other (specify): ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
01 / 30 / 2008

Transaction ID: C-3209-01Ww03

Amount of Each Receipt this Period

250.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Likes, Thomas D.**

Mailing Address

5811 SW 38th St.

City

Topeka

State

KS

Zip Code

66610

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kansas Livestock Association

Occupation

Executive V.P.

Receipt For:

Primary

General

Other (specify): ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

MM / DD / YYYY  
01 / 30 / 2008

Transaction ID: C-3230-01CA06

Amount of Each Receipt this Period

100.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....▶

500.00

TOTAL This Period (last page this line number only) .....▶

3975.00

2802018010

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	<input type="checkbox"/>	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Maag, James</b>		Date of Receipt MM / DD / YYYY 01 / 30 / 2008	
Mailing Address 1924 SW Indian Woods Ln		Transaction ID: C-3323-01wJ06	
City Topeka	State KS	Zip Code 66611	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <input type="checkbox"/>	
Name of Employer Foulston Siefkin	Occupation Government Realtions	Election Cycle-to-Date 450.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

Full Name (Last, First, Middle Initial) <b>B. Marks, Mark D.</b>		Date of Receipt MM / DD / YYYY 01 / 30 / 2008	
Mailing Address 1825 Wakarusa Dr.		Transaction ID: C-3367-03Oy02	
City Lawrence	State KS	Zip Code 66047	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <input type="checkbox"/>	
Name of Employer Wakarusa Vet Hospital	Occupation Veterinarian	Election Cycle-to-Date 225.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

Full Name (Last, First, Middle Initial) <b>C. Miller, Sue</b>		Date of Receipt MM / DD / YYYY 01 / 30 / 2008	
Mailing Address 2742 SW Plass Ave.		Transaction ID: C-3648-02Go06	
City Topeka	State KS	Zip Code 66611	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <input type="checkbox"/>	
Name of Employer Self-Employed	Occupation Homemaker	Election Cycle-to-Date 270.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) .....	220.00
TOTAL This Period (last page this line number only) .....	4195.00

28020180511

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Morrison, Robert</b>		Date of Receipt MM / DD / YYYY 01 / 30 / 2008
Mailing Address 64 Willowbrook		Transaction ID: C-3737-014W0B
City Hutchinson	State KS	Zip Code 67502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer None	Occupation Retired Orthodontist	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>B. Park, Judy S.</b>		Date of Receipt MM / DD / YYYY 01 / 30 / 2008
Mailing Address 12231 West Sheriac Circle		Transaction ID: C-4093-034x02
City Wichita	State KS	Zip Code 67235
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer USD 259	Occupation Teacher	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Parrish, Robert</b>		Date of Receipt MM / DD / YYYY 01 / 30 / 2008
Mailing Address 1911 McKinney Dr.		Transaction ID: C-4107-00h00D
City Great Bend	State KS	Zip Code 67530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 825.00	

SUBTOTAL of Receipts This Page (optional) .....	100.00
TOTAL This Period (last page this line number only) .....	4295.00

28020180512

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Rumsfeld, Joyce</b>		Date of Receipt M M / D D / Y Y Y Y <b>01 / 30 / 2008</b>
Mailing Address <b>606 North Talbor #114</b>		Transaction ID: <b>C-4610-03Xn01</b>
City <b>St. Michaels</b>	State <b>MD</b>	Zip Code <b>21663</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000.00</b>
Name of Employer <b>Self-Employed</b>	Occupation <b>Homemaker</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>2000.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Smith, Russell R.</b>		Date of Receipt M M / D D / Y Y Y Y <b>01 / 31 / 2008</b>
Mailing Address <b>999 3rd Avenue, Suite 3800</b>		Transaction ID: <b>C-4991-03Xm01</b>
City <b>Seattle</b>	State <b>WA</b>	Zip Code <b>98105</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>Third Coast Interntl Group, LLC</b>	Occupation <b>Senior Managing Partner</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Bradley, Dale A.</b>		Date of Receipt M M / D D / Y Y Y Y <b>02 / 05 / 2008</b>
Mailing Address <b>2411 Heartland Drive</b>		Transaction ID: <b>C-826-01De07</b>
City <b>Manhattan</b>	State <b>KS</b>	Zip Code <b>66503</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>Citizens State Bank</b>	Occupation <b>President</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>1700.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>4000.00</b>
TOTAL This Period (last page this line number only) .....	<b>8295.00</b>

28020180613

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

C00128876

Full Name (Last, First, Middle Initial) <b>A. Seitz, Richard J.</b>			Date of Receipt MM / DD / YYYY 02 / 05 / 2008		
Mailing Address 1252 Miller Dr.			Transaction ID: C-4814-01gb0F		
City Junction City	State KS	Zip Code 66441	Amount of Each Receipt this Period 900.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)		
Name of Employer None	Occupation Retired Army Officer				
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 2400.00				

Full Name (Last, First, Middle Initial) <b>B. Seitz, Richard J.</b>			Date of Receipt MM / DD / YYYY 02 / 05 / 2008		
Mailing Address 1252 Miller Dr.			Transaction ID: C-4815-01gb0G		
City Junction City	State KS	Zip Code 66441	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)		
Name of Employer None	Occupation Retired Army Officer				
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 2400.00				

Full Name (Last, First, Middle Initial) <b>C. Kislak, Jonathan I.</b>			Date of Receipt MM / DD / YYYY 02 / 06 / 2008		
Mailing Address 7900 Miami Lakes Drive West			Transaction ID: C-2936-03YX01		
City Miami Lakes	State FL	Zip Code 33016	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)		
Name of Employer Antares Capital Corporation	Occupation General Partner				
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 1000.00				

SUBTOTAL of Receipts This Page (optional) .....	2000.00
TOTAL This Period (last page this line number only) .....	10295.00

28020180614

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	<input type="checkbox"/>	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Mantilla, Joseph I.</b>		Date of Receipt MM / DD / YYYY 02 / 06 / 2008	
Mailing Address 1306 Lochbreeze Way		Transaction ID: C-3360-03YZ01	
City Orlando	State FL	Zip Code 32828	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <input type="checkbox"/>	
Name of Employer Petrizzo Strategic Group Inc.	Occupation VP	Election Cycle-to-Date 250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

Full Name (Last, First, Middle Initial) <b>B. Mellen III, Robert L.</b>		Date of Receipt MM / DD / YYYY 02 / 06 / 2008	
Mailing Address 9003 Classic Ct		Transaction ID: C-3556-03Yb01	
City Orlando	State FL	Zip Code 32819	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <input type="checkbox"/>	
Name of Employer Akerman Senterfitt	Occupation Partner	Election Cycle-to-Date 250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

Full Name (Last, First, Middle Initial) <b>C. Murphy, Paul C.</b>		Date of Receipt MM / DD / YYYY 02 / 06 / 2008	
Mailing Address 7620 Coquina Drive		Transaction ID: C-3810-03YT01	
City North Bay Village	State FL	Zip Code 33141	Amount of Each Receipt this Period 2300.00
FEC ID number of contributing federal political committee. C		Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <input type="checkbox"/>	
Name of Employer Developer	Occupation Managing Partner	Election Cycle-to-Date 2300.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) .....

2800.00

TOTAL This Period (last page this line number only) .....

13095.00

28020180515

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Petrizzo, T. J.</b>		Date of Receipt MM / DD / YYYY 02 / 06 / 2008
Mailing Address 552 John Anderson Drive		Transaction ID: C-4183-03Ya01
City Ormond Beach	State FL	Zip Code 32176
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Petrizzo Strategic Group Inc	Occupation Founder	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Ammar, Pamela</b>		Date of Receipt MM / DD / YYYY 02 / 12 / 2008
Mailing Address 345 N Belmont Place		Transaction ID: C-168-03Yf01
City Wichita	State KS	Zip Code 67208
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Wichita Children's Home	Occupation Rep. Community Service	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. Bayer, Burke B.</b>		Date of Receipt MM / DD / YYYY 02 / 12 / 2008
Mailing Address 736 Crestline Dr.		Transaction ID: C-526-02Br09
City Manhattan	State KS	Zip Code 66502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 400.00	

SUBTOTAL of Receipts This Page (optional) .....	850.00
TOTAL This Period (last page this line number only) .....	13945.00

2802018001B

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (in Full)

PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

**A. Edwards, Mark**

Mailing Address

439 W. 1ST St.

City

Junction City

State

KS

Zip Code

66441

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hoover Law Firm

Occupation  
Lawyer

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

1850.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2008

Transaction ID: C-1690-023506

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. Humbert, G. Cleve**

Mailing Address

2023 N. Pointe Drive

City

Manhattan

State

KS

Zip Code

66502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2008

Transaction ID: C-2622-02JE04

Amount of Each Receipt this Period

200.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Jahn, Judith M.**

Mailing Address

809 Michigan

City

Leavenworth

State

KS

Zip Code

66048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

MM / DD / YYYY  
02 / 12 / 2008

Transaction ID: C-2719-03Kt03

Amount of Each Receipt this Period

300.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

1500.00

TOTAL This Period (last page this line number only) .....

15445.00

28020180617

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Knudtson, John**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 2549 Lake Ridge Cir  
 City: Wichita State: KS Zip Code: 67205  
 Date of Receipt: 02 / 12 / 2008  
 Transaction ID: C-2996-03DN02  
 Amount of Each Receipt this Period: 500.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Wichita Radiological Group Occupation: Physician  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 1000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Murray, Ruth**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 902 Sunrise Hill  
 City: Junction City State: KS Zip Code: 66441  
 Date of Receipt: 02 / 12 / 2008  
 Transaction ID: C-3818-03AL03  
 Amount of Each Receipt this Period: 50.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Wal Mart Occupation: Associate in Ladies Wear  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 210.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Weibert, Carol S.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 2731 Heartland Valley Rd.  
 City: Manhattan State: KS Zip Code: 66503  
 Date of Receipt: 02 / 12 / 2008  
 Transaction ID: C-5663-02Kc03  
 Amount of Each Receipt this Period: 1000.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Self-Employed/Co-Owner/Control Occupation: Decatur County Feed Yard  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 1000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 1550.00  
 TOTAL This Period (last page this line number only) ..... 16995.00

28026185518

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Goode, Christopher J.</b>		Date of Receipt MM / DD / YYYY 02 / 14 / 2008
Mailing Address 1223 Portner Rd		Transaction ID: C-2166-03Yj01
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00	
Name of Employer Akin Gump Strauss Hauer & Feld	Occupation Advisor	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Vaart, Ryan</b>		Date of Receipt MM / DD / YYYY 02 / 14 / 2008
Mailing Address 2434-A S. Walter Reed Drive		Transaction ID: C-5499-03Yk01
City Arlington	State VA	Zip Code 22206
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00	
Name of Employer Akin Gump Strauss Hauer & Feld	Occupation Advisor	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Briggs, Ilene M.</b>		Date of Receipt MM / DD / YYYY 02 / 19 / 2008
Mailing Address 240 Drake Dr.		Transaction ID: C-861-026P04
City Manhattan	State KS	Zip Code 66503
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 300.00	
Name of Employer Briggs Jeep Eagle, Inc.	Occupation Officer	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) .....

800.00
17795.00

28020180619

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

C00128876

Full Name (Last, First, Middle Initial) <b>A. Briggs, Ilene M.</b>			Date of Receipt MM / DD / YYYY 02 / 19 / 2008		
Mailing Address 240 Drake Dr.			Transaction ID: C-862-026P05		
City Manhattan	State KS	Zip Code 66503	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)		
Name of Employer Briggs Jeep Eagle, Inc.	Occupation Officer				
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 3000.00				

Full Name (Last, First, Middle Initial) <b>B. Dakhil, Kathie</b>			Date of Receipt MM / DD / YYYY 02 / 19 / 2008		
Mailing Address 1420 N. Linden Cir			Transaction ID: C-1413-03Z801		
City Wichita	State KS	Zip Code 67206	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)		
Name of Employer Self-Employed	Occupation Homemaker				
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 250.00				

Full Name (Last, First, Middle Initial) <b>C. Daniels, Michael H.</b>			Date of Receipt MM / DD / YYYY 02 / 19 / 2008		
Mailing Address 1707 Thomas Cir			Transaction ID: C-1429-026S03		
City Manhattan	State KS	Zip Code 66502	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)		
Name of Employer Kansas State Bank	Occupation Vice President				
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 3000.00				

SUBTOTAL of Receipts This Page (optional) .....	1250.00
TOTAL This Period (last page this line number only) .....	19045.00

20020180520

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

C00128876

Full Name (Last, First, Middle Initial) <b>A. Daniels, Michael H.</b>			Date of Receipt MM / DD / YYYY 02 / 19 / 2008		
Mailing Address 1707 Thomas Cir			Transaction ID: C-1430-026S04		
City Manhattan	State KS	Zip Code 66502	Amount of Each Receipt this Period 700.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)		
Name of Employer Kansas State Bank	Occupation Vice President				
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 3000.00				

Full Name (Last, First, Middle Initial) <b>B. Flinchbaugh, B. L.</b>			Date of Receipt MM / DD / YYYY 02 / 19 / 2008		
Mailing Address 1943 Bluestem Terr			Transaction ID: C-1909-01xH03		
City Manhattan	State KS	Zip Code 66502	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)		
Name of Employer KSU	Occupation Professor				
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 450.00				

Full Name (Last, First, Middle Initial) <b>C. Howe, Evan</b>			Date of Receipt MM / DD / YYYY 02 / 19 / 2008		
Mailing Address 3006 Pawnee Cir			Transaction ID: C-2583-01tD05		
City Manhattan	State KS	Zip Code 66502	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)		
Name of Employer Baystone Financial Group	Occupation Attorney				
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 2000.00				

SUBTOTAL of Receipts This Page (optional) .....

1900.00

TOTAL This Period (last page this line number only) .....

20945.00

28020180021

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

C00128876

Full Name (Last, First, Middle Initial) <b>A. Knudtson, John</b>			Date of Receipt MM / DD / YYYY <b>02 / 19 / 2008</b>	
Mailing Address <b>2549 Lake Ridge Cir</b>			Transaction ID: <b>C-2997-03DN03</b>	
City <b>Wichita</b>	State <b>KS</b>	Zip Code <b>67205</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1	
Name of Employer <b>Wichita Radiological Group</b>		Occupation <b>Physician</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		Election Cycle-to-Date ▼ <b>1000.00</b>		

Full Name (Last, First, Middle Initial) <b>B. Kohlmeier, Stacy M.</b>			Date of Receipt MM / DD / YYYY <b>02 / 19 / 2008</b>	
Mailing Address <b>3446 Vanesta Dr.</b>			Transaction ID: <b>C-3017-03Hg02</b>	
City <b>Manhattan</b>	State <b>KS</b>	Zip Code <b>66503</b>	Amount of Each Receipt this Period <b>200.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)	
Name of Employer <b>Kansas State Bank</b>		Occupation <b>Sr. VP Lending</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		Election Cycle-to-Date ▼ <b>250.00</b>		

Full Name (Last, First, Middle Initial) <b>C. Lyons, Jan</b>			Date of Receipt MM / DD / YYYY <b>02 / 19 / 2008</b>	
Mailing Address <b>2481 McDowell Creek Road</b>			Transaction ID: <b>C-3319-01yg04</b>	
City <b>Manhattan</b>	State <b>KS</b>	Zip Code <b>66502</b>	Amount of Each Receipt this Period <b>200.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)	
Name of Employer <b>Lyons Ranch</b>		Occupation <b>Owner</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		Election Cycle-to-Date ▼ <b>2200.00</b>		

SUBTOTAL of Receipts This Page (optional) .....

**650.00**

TOTAL This Period (last page this line number only) .....

**21595.00**

28020180522

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

**C00128876**

Full Name (Last, First, Middle Initial) <b>A. Mullin, Dennis</b>		Date of Receipt MM / DD / YYYY 02 / 19 / 2008
Mailing Address 1305 Sharingbrook Drive		Transaction ID: C-3770-02wz02
City Manhattan	State KS	Zip Code 66503
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Steel & Pipe Supply Co. Inc.	Occupation President/CEO	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>B. Mullin, Dennis</b>		Date of Receipt MM / DD / YYYY 02 / 19 / 2008
Mailing Address 1305 Sharingbrook Drive		Transaction ID: C-3771-02wz03
City Manhattan	State KS	Zip Code 66503
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00
Name of Employer Steel & Pipe Supply Co. Inc.	Occupation President/CEO	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>C. Peterson, Randall</b>		Date of Receipt MM / DD / YYYY 02 / 19 / 2008
Mailing Address 2022 N. Red Oaks		Transaction ID: C-4179-034M03
City Wichita	State KS	Zip Code 67206
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Via Christi Health Systems	Occupation Hosp. Admin.	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) .....	1100.00
TOTAL This Period (last page this line number only) .....	22695.00

2002018002

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (in Full)  
PAT ROBERTS FOR SENATE

C00128876

A. Sink, Roger A.  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 Commerce Bank Tower  
 City State Zip Code  
 Manhattan KS 66502  
 FEC ID number of contributing federal political committee.  C  
 Name of Employer Occupation  
 Sink Gilmore & Gordon Accountant  
 Receipt For:  
 Primary  General  
 Other (specify):  Election Cycle-to-Date  
 3000.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2008

Transaction ID: C-4932-026b04

Amount of Each Receipt this Period

300.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

B. Sink, Roger A.  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 Commerce Bank Tower  
 City State Zip Code  
 Manhattan KS 66502  
 FEC ID number of contributing federal political committee.  C  
 Name of Employer Occupation  
 Sink Gilmore & Gordon Accountant  
 Receipt For:  
 Primary  General  
 Other (specify):  Election Cycle-to-Date  
 3000.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2008

Transaction ID: C-4933-026b05

Amount of Each Receipt this Period

700.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

C. Stehley, Judy  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 805 Wildcat Ridge  
 City State Zip Code  
 Manhattan KS 66502  
 FEC ID number of contributing federal political committee.  C  
 Name of Employer Occupation  
 None Retired  
 Receipt For:  
 Primary  General  
 Other (specify):  Election Cycle-to-Date  
 500.00

Date of Receipt

MM / DD / YYYY  
02 / 19 / 2008

Transaction ID: C-5113-01zu04

Amount of Each Receipt this Period

250.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

23945.00

28020180524

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
	12		13a		13b		14		

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. Thomas, Susan**

Mailing Address  
112 Longview

City State Zip Code  
Manhattan KS 66502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Kansas State University Director

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
MM / DD / YYYY  
02 / 19 / 2008

Transaction ID: C-5356-02JP04

Amount of Each Receipt this Period  
300.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. Thomas, Susan**

Mailing Address  
112 Longview

City State Zip Code  
Manhattan KS 66502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Kansas State University Director

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
MM / DD / YYYY  
02 / 19 / 2008

Transaction ID: C-5357-02JP05

Amount of Each Receipt this Period  
700.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. Haynes, Deborah G.**

Mailing Address  
9104 E. Killarney Pl

City State Zip Code  
Wichita KS 67206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wichita Surgical Specialists Physician

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
02 / 20 / 2008

Transaction ID: C-2384-03Co02

Amount of Each Receipt this Period  
500.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) .....

1500.00
25445.00

28020180021

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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11a  11b  11c  11d  
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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

**C00128876**

Full Name (Last, First, Middle Initial) <b>A. Craig, Charles</b>			Date of Receipt MM / DD / YYYY <b>02 / 25 / 2008</b>		
Mailing Address <b>3 Hawthorne Court</b>			Transaction ID: <b>C-1314-03ZC01</b>		
City <b>Newton</b>	State <b>KS</b>	Zip Code <b>67114</b>	Amount of Each Receipt this Period <b>500.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)		
Name of Employer <b>Self-Employed</b>		Occupation <b>Physician</b>	Election Cycle-to-Date <b>500.00</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼					

Full Name (Last, First, Middle Initial) <b>B. Glover II, Richard</b>			Date of Receipt MM / DD / YYYY <b>02 / 25 / 2008</b>		
Mailing Address <b>1331 Axtell Road</b>			Transaction ID: <b>C-2149-03ZE01</b>		
City <b>Newton</b>	State <b>KS</b>	Zip Code <b>67411</b>	Amount of Each Receipt this Period <b>250.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)		
Name of Employer <b>Axtell Clinic</b>		Occupation <b>Physician</b>	Election Cycle-to-Date <b>250.00</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼					

Full Name (Last, First, Middle Initial) <b>C. McAtee, Kimberly</b>			Date of Receipt MM / DD / YYYY <b>02 / 25 / 2008</b>		
Mailing Address <b>2710 Heartland Valley Road</b>			Transaction ID: <b>C-3437-03ZF01</b>		
City <b>Manhattan</b>	State <b>KS</b>	Zip Code <b>66503</b>	Amount of Each Receipt this Period <b>1000.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)		
Name of Employer <b>Knowledge Learning Corp</b>		Occupation <b>School Counselor</b>	Election Cycle-to-Date <b>1000.00</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼					

SUBTOTAL of Receipts This Page (optional) .....	<b>1750.00</b>
TOTAL This Period (last page this line number only) .....	<b>27195.00</b>

20020180520

SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	<input type="checkbox"/>	

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NAME OF COMMITTEE (in Full) PAT ROBERTS FOR SENATE C00128876

A. Bauer, Kyle C.  
Full Name (Last, First, Middle Initial)  
Mailing Address  
P. O. Box 96  
City State Zip Code  
Clay Center KS 67432  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Taylor Communications, Inc. Station Manager  
Receipt For:  
 Primary  General  
 Other (specify):  
Election Cycle-to-Date  
700.00

Date of Receipt  
02 / 26 / 2008  
Transaction ID: C-520-025103  
Amount of Each Receipt this Period  
200.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

B. Debruyn, Robert L.  
Full Name (Last, First, Middle Initial)  
Mailing Address  
2030 Pierre St  
City State Zip Code  
Manhattan KS 66502  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
The Master Teacher, Inc. CEO & Chairman of the Board  
Receipt For:  
 Primary  General  
 Other (specify):  
Election Cycle-to-Date  
1000.00

Date of Receipt  
02 / 26 / 2008  
Transaction ID: C-1480-03ZH01  
Amount of Each Receipt this Period  
1000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

C. Downey, Joseph  
Full Name (Last, First, Middle Initial)  
Mailing Address  
919 Fairway Drive  
City State Zip Code  
Manhattan KS 66502  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
None Retired  
Receipt For:  
 Primary  General  
 Other (specify):  
Election Cycle-to-Date  
3000.00

Date of Receipt  
02 / 26 / 2008  
Transaction ID: C-1598-00GY07  
Amount of Each Receipt this Period  
300.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) .....

1500.00  
28695.00

28020180627

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Downey, Joseph</b>		Date of Receipt MM / DD / YYYY 02 / 26 / 2008
Mailing Address 919 Fairway Drive		Transaction ID: C-1599-00GY08
City Manhattan	State KS	Zip Code 66502
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 700.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>B. Gilbaugh, James H.</b>		Date of Receipt MM / DD / YYYY 02 / 26 / 2008
Mailing Address 2622 Wilderness Cir.		Transaction ID: C-2121-03ZS01
City Wichita	State KS	Zip Code 67226
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Wichita Urology Group	Occupation Physician	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Glasscock, Kent</b>		Date of Receipt MM / DD / YYYY 02 / 26 / 2008
Mailing Address PO Box 37		Transaction ID: C-2143-022I09
City Manhattan	State KS	Zip Code 66505
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Nistac	Occupation Exec VP	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 3350.00	

SUBTOTAL of Receipts This Page (optional) .....	1150.00
TOTAL This Period (last page this line number only) .....	29845.00

20020180028



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Lucky, Fred J.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 14607 W. 89th St.  
 City State Zip Code  
 Lenexa KS 66215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Kansas Hospital Association Senior VP  
 Receipt For:  Primary  General  
 Other (specify):  
 Election Cycle-to-Date  
 350.00

Date of Receipt  
 02 / 26 / 2008  
 Transaction ID: C-3300-034J02  
 Amount of Each Receipt this Period  
 100.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Moeller, Christopher A.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 2018 N. Lindberg  
 City State Zip Code  
 Wichita KS 67206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed MD  
 Receipt For:  Primary  General  
 Other (specify):  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 02 / 26 / 2008  
 Transaction ID: C-3685-03ZP01  
 Amount of Each Receipt this Period  
 1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Mowry, Emily**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 2007 Arthur Drive  
 City State Zip Code  
 Manhattan KS 66502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 None Retired  
 Receipt For:  Primary  General  
 Other (specify):  
 Election Cycle-to-Date  
 300.00

Date of Receipt  
 02 / 26 / 2008  
 Transaction ID: C-3754-03A702  
 Amount of Each Receipt this Period  
 200.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

1300.00

TOTAL This Period (last page this line number only) .....

32695.00

28020180630

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Moxley, Tom**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 1852 S. 200 Rd.  
 City: Council Grove State: KS Zip Code: 66846  
 Date of Receipt: 02 / 26 / 2008  
 Transaction ID: C-3759-00du02  
 Amount of Each Receipt this Period: 200.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Self-Employed Occupation: Rancher  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 300.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Munson, Charles**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 5126 Liberty Hall Rd.  
 City: Junction City State: KS Zip Code: 66441  
 Date of Receipt: 02 / 26 / 2008  
 Transaction ID: C-3792-021504  
 Amount of Each Receipt this Period: 200.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Self-Employed Occupation: Farmer/Rancher  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 550.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Munson, Robert C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 4020 Liberty Hall Road  
 City: Junction City State: KS Zip Code: 66441  
 Date of Receipt: 02 / 26 / 2008  
 Transaction ID: C-3796-01j509  
 Amount of Each Receipt this Period: 200.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Central National Bank-Junction Occupation: President  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 1300.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 600.00  
 TOTAL This Period (last page this line number only) ..... 33295.00

1300201300331

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 OF 116

11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full)

PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

**A.** Nellis, C. Ruth

Mailing Address

2207 St. Andrews Cir.

City

Manhattan

State

KS

Zip Code

66502

FEC ID number of contributing federal political committee.

C

Name of Employer  
NISTAC K-State

Occupation  
Dir. of Knowledge Resources

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2008

Transaction ID: C-3891-03ZL01

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B.** Oleen, Lana

Mailing Address

3000 Stagg Hill Rd.

City

Manhattan

State

KS

Zip Code

66502

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Consultant

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2008

Transaction ID: C-4020-026Y05

Amount of Each Receipt this Period

100.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C.** Vanier, Marty

Mailing Address

5605 Blue River Road

City

Manhattan

State

KS

Zip Code

66502

FEC ID number of contributing federal political committee.

C

Name of Employer  
Kansas State University

Occupation  
Administrador

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

2250.00

Date of Receipt

MM / DD / YYYY  
02 / 26 / 2008

Transaction ID: C-5524-01Ak08

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

2100.00

TOTAL This Period (last page this line number only) .....

35395.00

280201800032

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	
							<input type="checkbox"/>	15

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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

C00128876

Full Name (Last, First, Middle Initial)  
**A. Hunton & Williams**

Mailing Address  
1900 K. Street N. W.

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt

M/M / D/D / YYY-YY-YY  
02 / 27 / 2008

Transaction ID: C-2640-03H103

Amount of Each Receipt this Period

1000.00

*\* Next page contains  
Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1  
Contributors. Each  
giving \$3.03 each*

Full Name (Last, First, Middle Initial)  
**B. Craig, Ben**

Mailing Address  
12529 Knox Street

City State Zip Code  
Overland Park KS 66213

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Metcalf Bank Bank Officer

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
1100.00

Date of Receipt

M/M / D/D / YYY-YY-YY  
03 / 05 / 2008

Transaction ID: C-1313-01qi07

Amount of Each Receipt this Period

250.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1

Full Name (Last, First, Middle Initial)  
**C. Morris, Bette M.**

Mailing Address  
140 S.W. Fairlawn Road

City State Zip Code  
Topeka KS 66606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
None Retired

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M/M / D/D / YYY-YY-YY  
03 / 05 / 2008

Transaction ID: C-3721-03Zn01

Amount of Each Receipt this Period

250.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) .....

1500.00

TOTAL This Period (last page this line number only) .....

36895.00

28020180633

\* Partnership of Hunton & Williams contributors

Ackerly, Benjamin C.	Crump, Cyane B.	Greef, Charles	Kulp, Christopher G.
Acosta-Lewis, Robert	Cummings, Ashley	Griffith, Greta T.	Landin, David Craig
Adams, Lawrence C.	Cunningham, Alexandra B.	Grout, Bradley W.	Lashway, David C.
Adams, Richard L.	Cunningham, Sean B.	Gutchess, Jeffrey W.	Lawrence, Andrew W.
Albers, Michael	Dannelly, William D.	Haberer, Miles B.	Lay, Wood W.
Albrecht, Virginia S.	Danon, Samuel A.	Hackney, Virginia H.	LeBey, Daniel M.
Alcott, Kenneth J.	Davidson, Barry R.	Hahn, Robert J.	Ledbetter, David O.
Alexander, Joseph B., Jr	Demm, Stephen P.	Haley, John F.	Leshin, L. Steven
Anderson, Thomas E.	Dobkin, Kenneth L.	Hanson, Ronald M.	Lieberman, Ronald J.
Andrews, Walter J.	Dorsey, Dee Ann	Hartwell, Ray V., III	Lillard, Thomas F.
Arbery, W. Christopher	Douma, Edward L.	Harvey, James A.	Little, Catherine D.
Austin, L. Scott	Dray, Mark S.	Hawkins, Robert W.	Little, Gregory G.
Barkus, A. Neal	Ducharme, Sean P.	Hayes, Timothy G.	Lonergan, David C.
Barnes, Haywood A.	Duffie, L. Traywick	Hedberg, Mark S.	Long, Nash E., III
Bascomb, Rudene	Dunlap, George, Jr	Heffner, Douglas J.	Louison, Audrey C.
Mercer	Eames, Frederick R.	Held, Michael	Loumiet, Carlos E.
Battles, Philip M., III	Edwards, Joseph C.	Henry, Matthew C.	Lowman, David S., Jr
Beardsworth, John J., Jr	Edwards, Robert H., Jr	Hershman, Scott	Maddy, Tyler
Bell, Kenneth D.	Edwards, W. Jeffery	Hesse, Gregory G.	Maisog, Manuel E.
Berman, Douglas	Eichman, John	Hettrick, George H.	Marcuis, Alan J.
Bierbower, Mark B.	Ellerman, Whitney	Heuhsen, Louanna O.	Marek, Brian
Biggs, Jo Ann	Ellis, L. Neal, Jr	Higbee, David A.	Margarit, Fernando
Blair, Jeff	Elmore, Edward W., Jr	Hiner, Thomas Y.	Maris, Stephen S.
Blayney, Michael J.	Emory, Frank E., Jr	Hoffman, D. Bruce	Martin, Jeffrey N.
Bowen, James W.	Enjamio, Juan C.	Hogfoss, Robert E.	Martin, John S.
Brandley, David F., Jr	Epps, John D.	Holloway, John E.	Martinez de Andino, J.
Breckinridge, Zonnie	Epps, Patricia K.	Holloway, John M., III	Michael
Bromby, Craig A.	Faglioni, Kelly L.	Holzgraefe, John	Martinez, Walfrido J.
Brown, A. Todd	Failla, Susan S.	Horner, Cecelia Philipps	Mathews, Joseph Clarke
Brown, Tyler P.	Feiler, Eric H.	Howell, George C., III	Mathews, Laurie Uustal
Brownell, F. William	Fenimore, Chet A.	Huey, Robert H.	McBride, William H.
Bulleit, Kristy A. N.	Fichthorn, Norman W.	Hughes, Thomas M.	McCann, Michael C.
Buonanno, Joseph B.	Field, Andrea Bear	Irwin, Donald P.	McConnell, Thomas A.
Burgard, Nadia	Fillmore, Robert M.	Itkin, Judith H.	McCormick, Patrick J., III
Buroker, Brian M.	Finto, Kevin J.	Jarvis, Lori Elliott	McCormick, Robert
Calvert, Matthew J.	Flynn, William M.	Jenkins, Matthew D.	McDermott, Francis A.
Campbell, Daniel M.	Freeman, Lauren E.	Jillson, Andrew E.	McGeoch, Alexander G.
Cantrill, Tom	Freilicher, Ira L.	Johnson, Harry M., III	McGranahan, John C., Jr
Carlson, Curtis G.	Fricke, David R.	Jones, James A., III	McIndoe, David T.
Carlson, Grady K.	Gall, Charles A.	Jones, Kevin W.	Meadows, James E.
Carter, Jean Gordon	Gary, Richard D.	Jones, Laura Ellen	Menezes, Mark W.
Case, Charles D.	Gasch, Manning, Jr	Jordanger, Dan J.	Messplay, Gary C.
Cawley, Thomas J.	Gerber, Andrew A.	Julin, Thomas R.	Miller, James Forrest
Chek, Lawrence	Gerhart, John T., Jr	Kailer, Alan	Mitchell, Patrick
Christman, James N.	Ghauri, Shahid	Kane, E. Peter	Moeller, John E., Jr
Clement, Whittington W.	Giese, Jeffrey	Kaufman, Thomas F.	Molenkamp, Jack A.
Clinard, R. Noel	Giragosian, C.	Kay, Geoffrey S.	Monroe, Charles R., Jr
Collins, Cassandra C.	Christopher	Kearfott, Joseph C.	Montgomery, Royce W.
Colvin, Stacy M.	Goettel, Timothy S.	Keeley, Michael G.	Montgomery, Will
Congleton, Joseph P.	Golden, Peter G.	Kenyon, Douglas W.	Moore, T. Justin, III
Connor, Terence G.	Goolsby, Allen C.	Kerrigan, Michael C.	Moore, Thurston R.
Cope, S. Gregory	Grable, Raul	Ketchum, Ryan T.	Moorhead, Bruce W., Jr
Cosby, Cameron N.	Granger, Douglas S.	King, Robert A.	Mortimer, Ann Marie
Cottingham, T. Thomas, III	Grass, Edward J.	Kochler, Sylvia King	Murdock, Eric J.
Craig, Ted C.	Gray, J. William, Jr	Koehler, Edward B.	Murphy, Frank J., Jr
		Konther, John T.	Murphy, Ted J.

Murphy, Thomas P.  
Mustone, David Albert  
Naughton, James P.  
Nedzbala, Michael  
Nickel, Henry V.  
Nunley, Lonnie D., III  
Nye, E. Allen, Jr  
O'Neill, John D., Jr  
O'Quinn, Pam Gates  
Okinaka, Leslie A.  
Otero, Brian V.  
Parks, Randall S.  
Partee, Peter S., Sr  
Pate, R. Hewitt  
Patterson, William S.  
Peña, H. R. Bert  
Pope, Robert Dean  
Posorske, Laurence H.  
Powell, Kurt A.  
Powell, Lewis F., III  
Pulley, J. Waverly, III  
Quackenboss, Robert T.  
Rainey, Dionne C.  
Rainey, Gordon F., Jr  
Range, John Jay  
Raphael, Stuart A.  
Rasife, Craig V.  
Ratino, John M.  
Rausch, Robert S.  
Reck, Belynda B.  
Rector, Baker R.  
Regan, Shawn Patrick  
Rewari, Sona  
Rice, Thomas A.  
Rist, Michael  
Ritter, J. G., II  
Robb, Kathy  
Robertson, Daryl  
Robertson, Gregory B.  
Rolfe, Robert M.  
Rosener, Ronald  
Rowe, William L. S.  
Ruby, Marguerite (Rita)  
R.  
Rusher, Mary Nash K.  
Sanzaro, Karen M.  
Sayers, Stephen M.  
Schmalz, Arthur E.  
Schmitt, Gregory  
Schneider, John R.  
Schreiber, Howard E.  
Schulman, Robert M.  
Schwer, Jeremy R.  
Seaman, P. Watson  
Seevers, James S., Jr  
Selby, Douglass P.

Sharp, Joel  
Shebelskie, Michael R.  
Sirgado, Jo Anne E.  
Sladek, William L.  
Slater, Thomas G., Jr  
Smelcer, B. Darrell  
Smith, Brooks M.  
Smith, Caryl Greenberg  
Smith, J. R.  
Solow, Steven P.  
Sotto, Lisa J.  
Stanko, Joseph C., Jr  
Steinberg, Marty  
Stenger, John  
Stevens, Catherine B.  
Stillman, Gregory N.  
Sullivan, C. Randolph  
Sweeney, R. Michael, Jr  
Talavera, Henry  
Tapscott, Andrew J.  
Tata, Robert M.  
Tate, Rodger L.  
Taylor, W. Lake, Jr  
Taylor, Wendell L.  
Teskin, Robin L.  
Thompson, Gary E.  
Tolley, B. Cary, III  
Toohey, Timothy J.  
Totten, Randolph F.  
Tsevdos, Dr. Estelle J.  
Tull, Melvin E., III  
Ungerman, Julie I.  
Van Deusen, Mark C.  
Vaughan, C. Porter, III  
Vowell, Mark  
Walsh, Linda L.  
Walsh, William A., Jr  
Warman, Lynnette R.  
Wasem, Mark R.  
Watts-FitzGerald, Abigail  
Weinstock, Peter  
Weisshaar, Mark G.  
Wellford, Hill B., Jr  
Wells, David E.  
Whitson, Jerry E.  
Wickes, Paul O.  
Wilan, Jonathan M.  
Williams, Amy McDaniel  
Williams, Gerry L.  
Wise, Robert K.  
Wood, Allison D.  
Woods, John W., Jr  
Yarnell, Scott F.  
Young, William F.  
Zaron, Andrew  
Zeugin, Lee B.

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Bowman, Gina M.</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2008
Mailing Address P.O. Box 901655		Transaction ID: C-805-01BW07
City Kansas City	State MO	Zip Code 64190
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer CVR Energy, Inc.	Occupation VP, Gov't Relations	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. Bowman, Gina M.</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2008
Mailing Address P.O. Box 901655		Transaction ID: C-806-01BW08
City Kansas City	State MO	Zip Code 64190
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer CVR Energy, Inc.	Occupation VP, Gov't Relations	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Dotchin, Robert J.</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2008
Mailing Address 412 North St. Asaph Street		Transaction ID: C-1592-03O702
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer The Advocacy Group	Occupation Lobbyist	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	3000.00
TOTAL This Period (last page this line number only) .....	39895.00

28020180626

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Gilges, J. W.</b>		Date of Receipt MM / DD / YYYY <b>03 / 06 / 2008</b>
Mailing Address <b>9301 Cherokee Pl</b>		Transaction ID: <b>C-2126-010003</b>
City <b>Leawood</b>	State <b>KS</b>	Zip Code <b>66206</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>None</b>	Occupation <b>Retired</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>275.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Langworthy, George</b>		Date of Receipt MM / DD / YYYY <b>03 / 06 / 2008</b>
Mailing Address <b>6025 Martway No 111</b>		Transaction ID: <b>C-3129-025B04</b>
City <b>Mission</b>	State <b>KS</b>	Zip Code <b>66202</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>Self-Employed</b>	Occupation <b>Retired</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>250.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Marvin, Donald</b>		Date of Receipt MM / DD / YYYY <b>03 / 06 / 2008</b>
Mailing Address <b>4824 Quail Crest Pl.</b>		Transaction ID: <b>C-3401-03Zw01</b>
City <b>Lawrence</b>	State <b>KS</b>	Zip Code <b>66049</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>Identigen</b>	Occupation <b>President and CEO</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>1000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>1500.00</b>
TOTAL This Period (last page this line number only) .....	<b>41395.00</b>

28020180637

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Bisogno, Joe**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 8997 Commerce Drive  
 City State Zip Code  
 De Soto KS 66018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Mr. Goodcents Subs & Pastas President & CEO  
 Receipt For:  
 Primary  General  
 Other (specify):   
 Election Cycle-to-Date **4000.00**

Date of Receipt  
 03 / 07 / 2008  
 Transaction ID: C-697-03Pn02  
 Amount of Each Receipt this Period  
**800.00**  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Bisogno, Joe**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 8997 Commerce Drive  
 City State Zip Code  
 De Soto KS 66018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Mr. Goodcents Subs & Pastas President & CEO  
 Receipt For:  
 Primary  General  
 Other (specify):   
 Election Cycle-to-Date **4000.00**

Date of Receipt  
 03 / 07 / 2008  
 Transaction ID: C-698-03Pn03  
 Amount of Each Receipt this Period  
**1700.00**  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Salisbury, John E.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 1455 SW Lakeside Drive  
 City State Zip Code  
 Topeka KS 66604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 None Retired  
 Receipt For:  
 Primary  General  
 Other (specify):   
 Election Cycle-to-Date **1000.00**

Date of Receipt  
 03 / 07 / 2008  
 Transaction ID: C-4639-03Zr01  
 Amount of Each Receipt this Period  
**1000.00**  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

**3500.00**

TOTAL This Period (last page this line number only) .....

**44895.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

**C00128876**

Full Name (Last, First, Middle Initial) <b>A. Barmby, Gavin T.</b>		Date of Receipt MM / DD / YYYY <b>03 / 10 / 2008</b>
Mailing Address <b>795 Ironwood</b>		Transaction ID: <b>C-469-03Pr02</b>
City <b>Olathe</b>	State <b>KS</b>	Zip Code <b>66061</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>Pyramid Contractors</b>	Occupation <b>Owner</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Beavers, Helen</b>		Date of Receipt MM / DD / YYYY <b>03 / 10 / 2008</b>
Mailing Address <b>203 Pawnee</b>		Transaction ID: <b>C-554-01KD08</b>
City <b>Hiawatha</b>	State <b>KS</b>	Zip Code <b>66434</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>75.00</b>
Name of Employer <b>Self-Employed</b>	Occupation <b>Homemaker</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>775.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Carrico, Tom P.</b>		Date of Receipt MM / DD / YYYY <b>03 / 10 / 2008</b>
Mailing Address <b>2344 W. 118TH Terr</b>		Transaction ID: <b>C-1035-01sE03</b>
City <b>Leawood</b>	State <b>KS</b>	Zip Code <b>66211</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>Gill Studios Inc.</b>	Occupation <b>Printing Management</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>500.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>1075.00</b>
TOTAL This Period (last page this line number only) .....	<b>45970.00</b>

28020180639

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Coleman, Richard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 1305 Woodland Terrace  
 City: Pittsburg State: KS Zip Code: 66762  
 Date of Receipt: 03 / 10 / 2008  
 Transaction ID: C-1195-02xx04  
 Amount of Each Receipt this Period: 250.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Millers Professional Imaging Occupation: Photographic Imaging  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 850.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Cooke II, Thornton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 75 Le Mans Ct  
 City: Shawnee Mission State: KS Zip Code: 66208  
 Date of Receipt: 03 / 10 / 2008  
 Transaction ID: C-1270-03SM02  
 Amount of Each Receipt this Period: 1000.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: None Occupation: Retired  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 2000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Ferrell, Jim**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 444 W. 47th St., #415  
 City: Kansas City State: MO Zip Code: 64112  
 Date of Receipt: 03 / 10 / 2008  
 Transaction ID: C-1868-031x02  
 Amount of Each Receipt this Period: 2300.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Ferrell Gas Occupation: Chrmn/CEO  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 4600.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 3550.00  
 TOTAL This Period (last page this line number only) ..... 49520.00

28020180640

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14
							15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Henrichs, George</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2008
Mailing Address 2103 Hart Ave.		Transaction ID: C-2440-02Ki07
City Dodge City	State KS	Zip Code 67801
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00	
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 1050.00	

Full Name (Last, First, Middle Initial) <b>B. Irlandi, James J.</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2008
Mailing Address 1809 N. Broadway # F.		Transaction ID: C-2685-01Rp0D
City Wichita	State KS	Zip Code 67214
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00	
Name of Employer Skill Transportation Consulting,	Occupation President	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) <b>C. McMillen, Jeffrey</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2008
Mailing Address 8623 Leroy Place		Transaction ID: C-3519-03a001
City Fairfax	State VA	Zip Code 22031
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00	
Name of Employer Akin Gump Strauss Hauer & Feld	Occupation Partner	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) .....

750.00
50270.00

28020180641

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14
							15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Paxon, L. William**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 4004 Sharp Pl  
 City State Zip Code  
 Alexandria VA 22304  
 Date of Receipt  
 03 / 10 / 2008  
 Transaction ID: C-4124-03Zz01  
 Amount of Each Receipt this Period  
 1000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Akin Gump Strauss Hauer & Feld Sr Advisor  
 Receipt For:  Primary  General  
 Other (specify):  
 Election Cycle-to-Date  
 1000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Sandlian, Colby B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 435 N. Broadway Ste 201  
 City State Zip Code  
 Wichita KS 67202  
 Date of Receipt  
 03 / 10 / 2008  
 Transaction ID: C-4655-01Gu09  
 Amount of Each Receipt this Period  
 600.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Sandlian Realty RE Developer  
 Receipt For:  Primary  General  
 Other (specify):  
 Election Cycle-to-Date  
 4600.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Gibson, David W.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 5049 Wornall Rd., Apt. 2A  
 City State Zip Code  
 Kansas City MO 64112  
 Date of Receipt  
 03 / 11 / 2008  
 Transaction ID: C-2116-01Lb06  
 Amount of Each Receipt this Period  
 1000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed Commodity Trading  
 Receipt For:  Primary  General  
 Other (specify):  
 Election Cycle-to-Date  
 1000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 2600.00  
 TOTAL This Period (last page this line number only) ..... 52870.00

28020180642

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Selanders, Jay</b>			Date of Receipt MM / DD / YYYY 03 / 11 / 2008		
Mailing Address 6501 Valley Road			Transaction ID: C-4816-03a201		
City Kansas City	State MO	Zip Code 64113	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)			
Name of Employer Kutak Rock LLP	Occupation Attorney	Election Cycle-to-Date 500.00			
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):					

Full Name (Last, First, Middle Initial) <b>B. White, Robert M.</b>			Date of Receipt MM / DD / YYYY 03 / 11 / 2008		
Mailing Address 815 W. 52nd Street			Transaction ID: C-5753-029606		
City Kansas City	State MO	Zip Code 64112	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)			
Name of Employer None	Occupation Retired	Election Cycle-to-Date 900.00			
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):					

Full Name (Last, First, Middle Initial) <b>C. Bales, Pauline R.</b>			Date of Receipt MM / DD / YYYY 03 / 12 / 2008		
Mailing Address 1501 Inverness Dr., #123			Transaction ID: C-302-03a601		
City Lawrence	State KS	Zip Code 66047	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)			
Name of Employer Self-Employed	Occupation Homemaker	Election Cycle-to-Date 500.00			
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):					

SUBTOTAL of Receipts This Page (optional) .....	1500.00
TOTAL This Period (last page this line number only) .....	54370.00

20020180843

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Cooper, June</b>			Date of Receipt MM / DD / YYYY <b>03 / 12 / 2008</b>		
Mailing Address <b># 9 Country Club Dr.</b>			Transaction ID: <b>C-1274-01JY04</b>		
City <b>Garnett</b>	State <b>KS</b>	Zip Code <b>66032</b>	Amount of Each Receipt this Period <b>500.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)		
Name of Employer <b>Patriots Bank</b>		Occupation <b>Public Relations</b>	Election Cycle-to-Date <b>1500.00</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼					

Full Name (Last, First, Middle Initial) <b>B. Dunn Sr., William H.</b>			Date of Receipt MM / DD / YYYY <b>03 / 12 / 2008</b>		
Mailing Address <b>53 Coventry Ct</b>			Transaction ID: <b>C-1643-03Qr02</b>		
City <b>Prairie Village</b>	State <b>KS</b>	Zip Code <b>66208</b>	Amount of Each Receipt this Period <b>250.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)		
Name of Employer <b>JE Dunn Construction Co</b>		Occupation <b>Bldg Contractor/CH &amp; CEO</b>	Election Cycle-to-Date <b>750.00</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼					

Full Name (Last, First, Middle Initial) <b>C. Garney, Charles A.</b>			Date of Receipt MM / DD / YYYY <b>03 / 12 / 2008</b>		
Mailing Address <b>4200 N. Hickory Ln</b>			Transaction ID: <b>C-2058-03a401</b>		
City <b>Kansas City</b>	State <b>MO</b>	Zip Code <b>64116</b>	Amount of Each Receipt this Period <b>1000.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)		
Name of Employer <b>Briarcliff Development Co.</b>		Occupation <b>Chairman &amp; CEO</b>	Election Cycle-to-Date <b>1000.00</b>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼					

SUBTOTAL of Receipts This Page (optional) .....	<b>1750.00</b>
TOTAL This Period (last page this line number only) .....	<b>56120.00</b>

28020180644

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Henderson, Cheryl Brown</b>		Date of Receipt MM / DD / YYYY <b>03 / 12 / 2008</b>
Mailing Address <b>PO Box 4862</b>		Transaction ID: <b>C-2429-01ya05</b>
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66604</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>Brown Foundation</b>	Occupation <b>Non Profit Administrator</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>350.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Higham, Robin</b>		Date of Receipt MM / DD / YYYY <b>03 / 12 / 2008</b>
Mailing Address <b>2961 Nevada St.</b>		Transaction ID: <b>C-2481-02n002</b>
City <b>Manhattan</b>	State <b>KS</b>	Zip Code <b>66502</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>Sunflower University Press</b>	Occupation <b>President</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>250.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Hughes, David H.</b>		Date of Receipt MM / DD / YYYY <b>03 / 12 / 2008</b>
Mailing Address <b>2110 W. 67th Terr</b>		Transaction ID: <b>C-2612-03Q302</b>
City <b>Mission Hills</b>	State <b>KS</b>	Zip Code <b>66208</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>None</b>	Occupation <b>Retired</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>1000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>1000.00</b>
TOTAL This Period (last page this line number only) .....	<b>57120.00</b>

28020180645

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Kyle, Philip W.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 1918 E. 51st, Suite 4 East  
 City State Zip Code  
 Tulsa OK 74105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer  
 Self-Employed  
 Occupation  
 Attorney  
 Receipt For:  
 Primary  General  
 Other (specify):   
 Election Cycle-to-Date **750.00**

Date of Receipt  
 03 / 12 / 2008  
 Transaction ID: C-3089-01RU04  
 Amount of Each Receipt this Period  
**250.00**  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Laughlin, Winnie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 PO Box 293, 210 S. Dean  
 City State Zip Code  
 Mount Hope KS 67108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer  
 Self-Employed  
 Occupation  
 Homemaker  
 Receipt For:  
 Primary  General  
 Other (specify):   
 Election Cycle-to-Date **4400.00**

Date of Receipt  
 03 / 12 / 2008  
 Transaction ID: C-3150-034w04  
 Amount of Each Receipt this Period  
**2000.00**  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Lynch, Dorothy W.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 26695 W Greentree Ct  
 City State Zip Code  
 Olathe KS 66061  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer  
 None  
 Occupation  
 Retired  
 Receipt For:  
 Primary  General  
 Other (specify):   
 Election Cycle-to-Date **600.00**

Date of Receipt  
 03 / 12 / 2008  
 Transaction ID: C-3316-01ax03  
 Amount of Each Receipt this Period  
**500.00**  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....  
 TOTAL This Period (last page this line number only) .....

**2750.00**  
**59870.00**

28020180646

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. Peterson, Alan N.**

Mailing Address  
**2412 N. Gouverneur**

City **Wichita** State **KS** Zip Code **67226**

FEC ID number of contributing federal political committee. **C**

Name of Employer **None** Occupation **Retired**

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **250.00**

Date of Receipt **03 / 12 / 2008**

Transaction ID: **C-4167-02R908**

Amount of Each Receipt this Period **40.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. Regnier, Robert D.**

Mailing Address  
**3400 W 119th Street**

City **Leawood** State **KS** Zip Code **66209**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Bank of Blue Valley** Occupation **President**

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **3000.00**

Date of Receipt **03 / 12 / 2008**

Transaction ID: **C-4397-01q108**

Amount of Each Receipt this Period **300.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. Regnier, Robert D.**

Mailing Address  
**3400 W 119th Street**

City **Leawood** State **KS** Zip Code **66209**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Bank of Blue Valley** Occupation **President**

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **3000.00**

Date of Receipt **03 / 12 / 2008**

Transaction ID: **C-4398-01q109**

Amount of Each Receipt this Period **700.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... **1040.00**

**TOTAL** This Period (last page this line number only) ..... **60910.00**

28020180647



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. Thompson, Barbara L.**

Mailing Address  
**8907 E. Douglas**

City **Wichita** State **KS** Zip Code **67207**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Fleeson, Gooing, Coulson & Kitch** Occupation **Attorney**

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **550.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 12 / 2008**

Transaction ID: **C-5360-02n304**

Amount of Each Receipt this Period  
**200.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. Zimmerman Jr., Mrs. Ben**

Mailing Address  
**1809 Burr Parkway**

City **Dodge City** State **KS** Zip Code **67801**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Homemaker**

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **950.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 12 / 2008**

Transaction ID: **C-5952-02wV09**

Amount of Each Receipt this Period  
**100.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. Love, William**

Mailing Address  
**10400 Howe Lane**

City **Leawood** State **KS** Zip Code **66206**

FEC ID number of contributing federal political committee. **C**

Name of Employer **W.P. Love Partners, LLC** Occupation **Finance**

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **1500.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 13 / 2008**

Transaction ID: **C-3285-038k02**

Amount of Each Receipt this Period  
**500.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

**800.00**

TOTAL This Period (last page this line number only) .....

**63060.00**

28020180649

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (in Full)

PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

**A. Hatch, Robert W.**

Mailing Address

601 W 55th Street

City

Kansas City

State

MO

Zip Code

64113

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Cereal Ingredients

Occupation  
CEO

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
03 / 14 / 2008

Transaction ID: C-2355-03aT01

Amount of Each Receipt this Period

250.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. Houston, Macie**

Mailing Address

12908 W. 74th Terr

City

Shawnee

State

KS

Zip Code

66216

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
US Dept HUD

Occupation  
Regional Director

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
03 / 17 / 2008

Transaction ID: C-2581-03aV01

Amount of Each Receipt this Period

250.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Laws, Judith**

Mailing Address

4512 SW Moundview Drive

City

Topeka

State

KS

Zip Code

66610

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
State Farm Insurance Co.

Occupation  
Agency Field Executive

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
03 / 17 / 2008

Transaction ID: C-3156-03Y602

Amount of Each Receipt this Period

250.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

750.00

TOTAL This Period (last page this line number only) .....

63810.00

20020180650

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
	12		13a		13b		14		

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Reynolds, Fred D.**

Full Name (Last, First, Middle Initial)  
Mailing Address  
9717 W 123rd Street  
City Overland Park State KS Zip Code 66213

Date of Receipt: 03 / 17 / 2008  
Transaction ID: C-4438-03aU01

Amount of Each Receipt this Period: 250.00

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed Occupation: Interior Designer

Receipt For:  Primary  General  Other (specify):  
Election Cycle-to-Date: 250.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Averette, W. Todd**

Full Name (Last, First, Middle Initial)  
Mailing Address  
1620 L. Street NW, Suite 1210  
City Washington State DC Zip Code 20036

Date of Receipt: 03 / 18 / 2008  
Transaction ID: C-272-03Uu02

Amount of Each Receipt this Period: 250.00

FEC ID number of contributing federal political committee: C

Name of Employer: Washington Advocacy Group, Occupation: Managing Partner

Receipt For:  Primary  General  Other (specify):  
Election Cycle-to-Date: 971.80

**Partner MEMO**  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)  
*Ties to Page 55*

**C. Barry, Don**

Full Name (Last, First, Middle Initial)  
Mailing Address  
2002 Keeneland  
City Wichita State KS Zip Code 67201

Date of Receipt: 03 / 18 / 2008  
Transaction ID: C-485-03BO02

Amount of Each Receipt this Period: 2000.00

FEC ID number of contributing federal political committee: C

Name of Employer: A.G. Edwards Occupation: Broker

Receipt For:  Primary  General  Other (specify):  
Election Cycle-to-Date: 4300.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 2250.00

TOTAL This Period (last page this line number only) ..... 66060.00

28020180651

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Barry, Lora**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 2002 Keeneland  
 City: Wichita State: KS Zip Code: 67201  
 Date of Receipt: 03 / 18 / 2008  
 Transaction ID: C-496-03BP02  
 Amount of Each Receipt this Period: 2000.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Emprise Bank Occupation: Banker  
 Receipt For:  Primary  General  
 Election Cycle-to-Date: 4300.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Blair, John F.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 829 Davis Drive  
 City: Manhattan State: KS Zip Code: 66502  
 Date of Receipt: 03 / 18 / 2008  
 Transaction ID: C-708-03aF01  
 Amount of Each Receipt this Period: 500.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: M2 Technologies, Inc. Occupation: Program Manager  
 Receipt For:  Primary  General  
 Election Cycle-to-Date: 500.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Bockorny, David A.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 3101 S. Bishop Jones Pl  
 City: Sioux Falls State: SD Zip Code: 57103  
 Date of Receipt: 03 / 18 / 2008  
 Transaction ID: C-747-01NN03  
 Amount of Each Receipt this Period: 500.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Bockorny Group Occupation: Consultant  
 Receipt For:  Primary  General  
 Election Cycle-to-Date: 750.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 3000.00  
 TOTAL This Period (last page this line number only) ..... 69060.00

28020180652

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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11a  11b  11c  11d  
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Boesch, Doyce A.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 1201 Pennsylvania Av NW, Ste. 325  
 City: Washington State: DC Zip Code: 20004  
 Date of Receipt: 03 / 18 / 2008  
 Transaction ID: C-755-03O604  
 Amount of Each Receipt this Period: 250.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Boesch & Company Occupation: Principal  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 1000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Cohen, Mary Davidson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 12617 Briar  
 City: Leawood State: KS Zip Code: 66209  
 Date of Receipt: 03 / 18 / 2008  
 Transaction ID: C-1175-03Lz02  
 Amount of Each Receipt this Period: 250.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: U. S. Dept. of Education Occupation: Secretary's Regional Representative  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 1750.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Davison, Joe D.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 1200 S. 119th St. W.  
 City: Wichita State: KS Zip Code: 67235  
 Date of Receipt: 03 / 18 / 2008  
 Transaction ID: C-1453-03aK01  
 Amount of Each Receipt this Period: 500.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: West Wichita Family Physicians Occupation: Physician  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 500.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 1000.00  
 TOTAL This Period (last page this line number only) ..... 70060.00

28020180653

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14
							15

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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
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Full Name (Last, First, Middle Initial) <b>A. Dunn, Stephen D.</b>		Date of Receipt MM / DD / YYYY <b>03 / 18 / 2008</b>	
Mailing Address <b>5401 Pawnee Lane</b>		Transaction ID: <b>C-1632-03Pv02</b>	
City <b>Fairway</b>	State <b>KS</b>	Zip Code <b>66205</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)	
Name of Employer <b>JE Dunn Construction Company</b>	Occupation <b>General Contractor</b>	Election Cycle-to-Date <b>1500.00</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼			

Full Name (Last, First, Middle Initial) <b>B. Hall, Douglas H.</b>		Date of Receipt MM / DD / YYYY <b>03 / 18 / 2008</b>	
Mailing Address <b>11212 Delmar St.</b>		Transaction ID: <b>C-2279-03UT02</b>	
City <b>Leawood</b>	State <b>KS</b>	Zip Code <b>66211</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)	
Name of Employer <b>Musselman &amp; Hall Contractors</b>	Occupation <b>CEO</b>	Election Cycle-to-Date <b>500.00</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼			

Full Name (Last, First, Middle Initial) <b>C. Jahnke, Marilyn K.</b>		Date of Receipt MM / DD / YYYY <b>03 / 18 / 2008</b>	
Mailing Address <b>6215 Arapahoe</b>		Transaction ID: <b>C-2721-03aL01</b>	
City <b>Shawnee</b>	State <b>KS</b>	Zip Code <b>66226</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)	
Name of Employer <b>WHT</b>	Occupation <b>Vice President</b>	Election Cycle-to-Date <b>500.00</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼			

SUBTOTAL of Receipts This Page (optional) .....	<b>1750.00</b>
TOTAL This Period (last page this line number only) .....	<b>71810.00</b>

200201800100

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Keating, Patrick J.**

Full Name (Last, First, Middle Initial)  
Mailing Address  
156 Bethany Dr.

City: Manhattan State: KS Zip Code: 66503

FEC ID number of contributing federal political committee: **C**

Name of Employer: Keating & Assoc. Occupation: Financial

Receipt For:  Primary  General  Other (specify):

Election Cycle-to-Date: 2000.00

Date of Receipt: 03 / 18 / 2008  
Transaction ID: C-2867-03aR01  
Amount of Each Receipt this Period: 2000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Lair, Mary Alice**

Full Name (Last, First, Middle Initial)  
Mailing Address  
250 N. County Club Rd.

City: Chanute State: KS Zip Code: 66720

FEC ID number of contributing federal political committee: **C**

Name of Employer: Self-Employed Occupation: Homemaker

Receipt For:  Primary  General  Other (specify):

Election Cycle-to-Date: 325.00

Date of Receipt: 03 / 18 / 2008  
Transaction ID: C-3102-03Xb02  
Amount of Each Receipt this Period: 250.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Lee, Paul M.**

Full Name (Last, First, Middle Initial)  
Mailing Address  
River Bend Estates, 770 Strawfield Lane

City: Great Falls State: VA Zip Code: 22066

FEC ID number of contributing federal political committee: **C**

Name of Employer: Brownrudnick-International Law Occupation: Consultant

Receipt For:  Primary  General  Other (specify):

Election Cycle-to-Date: 2000.00

Date of Receipt: 03 / 18 / 2008  
Transaction ID: C-3181-033s04  
Amount of Each Receipt this Period: 250.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 2500.00

TOTAL This Period (last page this line number only) ..... 74310.00

28020180033

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	C00128876
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Full Name (Last, First, Middle Initial) <b>A. Macha, Lawrence L.</b>		Date of Receipt MM / DD / YYYY <b>03 / 18 / 2008</b>
Mailing Address <b>2805 Funston</b>		Transaction ID: <b>C-3327-03aN01</b>
City <b>Iola</b>	State <b>KS</b>	Zip Code <b>66749</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>Sekan Asphalt Services</b>	Occupation <b>CFO</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Meyer, Lisa J.</b>		Date of Receipt MM / DD / YYYY <b>03 / 18 / 2008</b>
Mailing Address <b>1463 A. St. N. E.</b>		Transaction ID: <b>C-3597-03Tw02</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20002</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>Cornerstone Governmnet Affairs</b>	Occupation <b>VP</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>750.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Meyers, Jan</b>		Date of Receipt MM / DD / YYYY <b>03 / 18 / 2008</b>
Mailing Address <b>8408 W. 90th St.</b>		Transaction ID: <b>C-3607-03Mf02</b>
City <b>Overland Park</b>	State <b>KS</b>	Zip Code <b>66212</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>None</b>	Occupation <b>Retired former member of congress</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>700.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>1500.00</b>
TOTAL This Period (last page this line number only) .....	<b>75810.00</b>

28020180650

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)

**A. Paul, Terry L.**

Mailing Address  
C/O Cassidy & Associates Inc., 700 13th St. NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cassidy & Associates Executive VP & Dir Cassidy Defense

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **1500.00**

Date of Receipt

**03 / 18 / 2008**

Transaction ID: **C-4121-02Nf04**

Amount of Each Receipt this Period

**500.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Powell, Peter**

Mailing Address  
5318 Sunset Dr.

City State Zip Code  
Kansas City MO 64112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
BSC Holding Executive

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **2300.00**

Date of Receipt

**03 / 18 / 2008**

Transaction ID: **C-4264-03aP01**

Amount of Each Receipt this Period

**2300.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Rhee, Helen R.**

Mailing Address  
153 - 11th St. NE

City State Zip Code  
Washington DC 20002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Amgen Director, Government Affairs

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **4000.00**

Date of Receipt

**03 / 18 / 2008**

Transaction ID: **C-4443-033g05**

Amount of Each Receipt this Period

**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

**3800.00**

TOTAL This Period (last page this line number only) .....

**79610.00**

28020180057

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Rhodes, Roland L.</b>			Date of Receipt MM / DD / YYYY 03 / 18 / 2008	
Mailing Address 27585 W. 183RD St.			Transaction ID: C-4447-01Go09	
City Gardner	State KS	Zip Code 66030	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)	
Name of Employer Rhodes Chemical Co. Inc.		Occupation CEO		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		Election Cycle-to-Date ▼ 1250.00		

Full Name (Last, First, Middle Initial) <b>B. Russell, Randall</b>			Date of Receipt MM / DD / YYYY 03 / 18 / 2008	
Mailing Address 940 Swinks Mill Road			Transaction ID: C-4617-003O06	
City McLean	State VA	Zip Code 22102	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)	
Name of Employer Leshar and Russell		Occupation Consultant		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		Election Cycle-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) <b>C. Schuster, Deryl</b>			Date of Receipt MM / DD / YYYY 03 / 18 / 2008	
Mailing Address 27931 W. 87th St. South			Transaction ID: C-4756-00na0F	
City Viola	State KS	Zip Code 67149	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)	
Name of Employer U.S. Bank		Occupation Commercial Lender		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		Election Cycle-to-Date ▼ 3625.00		

SUBTOTAL of Receipts This Page (optional) .....	1250.00
TOTAL This Period (last page this line number only) .....	80860.00

28020180518

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Simmons, Vernon N.**

Full Name (Last, First, Middle Initial)  
Mailing Address  
22 Kinross Drive  
City: Stafford State: VA Zip Code: 22554

FEC ID number of contributing federal political committee: **C**

Name of Employer: Cassidy & Associates Occupation: Senior Associate

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 18 / 2008  
Transaction ID: C-4925-036402  
Amount of Each Receipt this Period: 250.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Standlee, Christopher**

Full Name (Last, First, Middle Initial)  
Mailing Address  
682 Shadowridge Drive  
City: Wildwood State: MO Zip Code: 63011

FEC ID number of contributing federal political committee: **C**

Name of Employer: Abengoa Bioenergy Corp. Occupation: VP & Secretary General

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date: 1000.00

Date of Receipt: 03 / 18 / 2008  
Transaction ID: C-5086-030E02  
Amount of Each Receipt this Period: 500.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Sullivan, Charles A.**

Full Name (Last, First, Middle Initial)  
Mailing Address  
2120 W. 117TH St.  
City: Leawood State: KS Zip Code: 66211

FEC ID number of contributing federal political committee: **C**

Name of Employer: None Occupation: Retired

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date: 1500.00

Date of Receipt: 03 / 18 / 2008  
Transaction ID: C-5198-010D06  
Amount of Each Receipt this Period: 500.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1250.00

**TOTAL** This Period (last page this line number only) ..... 82110.00

20020180659

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. Tacha, Carolyn K.**

Mailing Address  
317 N 17th Street

City State Zip Code  
Manhattan KS 66502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
None Retired Teacher

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify): ▼ 1000.00

Date of Receipt  
03 / 18 / 2008

Transaction ID: C-5233-03a001

Amount of Each Receipt this Period  
1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. Taylor, Kathleen**

Mailing Address  
215 E. Harry

City State Zip Code  
Andover KS 67002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Homemaker

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify): ▼ 4600.00

Date of Receipt  
03 / 18 / 2008

Transaction ID: C-5269-03FO02

Amount of Each Receipt this Period  
2300.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. Tribble, Max B.**

Mailing Address  
1620 L. Street NW, Suite 1210

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Washington Advocacy Group, Managing Partner

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify): ▼ 971.80

Date of Receipt  
03 / 18 / 2008

Transaction ID: C-5413-03Ut02

Amount of Each Receipt this Period  
250.00

**Partner MEMO**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

*Ties to Page 55*

SUBTOTAL of Receipts This Page (optional) ..... ➔

TOTAL This Period (last page this line number only) ..... ➔

3300.00

85410.00

28020180550

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. Washington Advocacy Group Llc**

Mailing Address  
Attn: Max B. Tribble, P. O. Box 32240

City State Zip Code  
Washington DC 20007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
1943.60

Date of Receipt  
03 / 18 / 2008

Transaction ID: C-5655-03Us02

Amount of Each Receipt this Period  
500.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. Winn, Joan E.**

Mailing Address  
8420 Roe Ave.

City State Zip Code  
Shawnee Mission KS 66207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
None Retired

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
03 / 18 / 2008

Transaction ID: C-5857-02qZ02

Amount of Each Receipt this Period  
500.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. Allen, Maxine B.**

Mailing Address  
9606 West 95th Street

City State Zip Code  
Overland Park KS 66212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
None Retired

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
1025.00

Date of Receipt  
03 / 19 / 2008

Transaction ID: C-104-03Xf02

Amount of Each Receipt this Period  
1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....▶

TOTAL This Period (last page this line number only) .....▶

2000.00

87410.00

28020180661

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

**C00128876**

Full Name (Last, First, Middle Initial)

**A. Farha, George J.**

Mailing Address  
1313 N. Webb Rd. Ste 240

City State Zip Code  
Wichita KS 67206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
None Retired General Surgeon

Receipt For:  Primary  General  
 Other (specify):   
Election Cycle-to-Date **3500.00**

Date of Receipt

**MEM / DD / YYYY**  
**03 / 19 / 2008**

Transaction ID: **C-1818-01CR0C**

Amount of Each Receipt this Period

**500.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. Ferrell, Elizabeth**

Mailing Address  
444 W. 47th St, Ste 415

City State Zip Code  
Kansas City MO 64112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Homemaker

Receipt For:  Primary  General  
 Other (specify):   
Election Cycle-to-Date **4600.00**

Date of Receipt

**MEM / DD / YYYY**  
**03 / 19 / 2008**

Transaction ID: **C-1866-037R02**

Amount of Each Receipt this Period

**2300.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Murray, Ruth**

Mailing Address  
902 Sunrise Hill

City State Zip Code  
Junction City KS 66441

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wal Mart Associate in Ladies Wear

Receipt For:  Primary  General  
 Other (specify):   
Election Cycle-to-Date **210.00**

Date of Receipt

**MEM / DD / YYYY**  
**03 / 19 / 2008**

Transaction ID: **C-3819-03AL04**

Amount of Each Receipt this Period

**75.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) .....

**2875.00**

**90285.00**

28020180662

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

C00128876

**A. Robbins, Yvonne**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 2703 Mc Kinley  
 City State Zip Code  
 Great Bend KS 67530  
 Date of Receipt  
 03 / 19 / 2008  
 Transaction ID: C-4492-02gK06  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Farmers Bank & Trust, N.A. Occupation: Banking-Owner  
 Receipt For:  Primary  General  
 Other (specify): Election Cycle-to-Date: 3800.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

**B. Schmidtberger, Marvin L.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 410 North Thompson, Box 424  
 City State Zip Code  
 Pratt KS 67124  
 Date of Receipt  
 03 / 19 / 2008  
 Transaction ID: C-4723-02IH04  
 Amount of Each Receipt this Period  
 250.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Self-Employed Occupation: Real Estate  
 Receipt For:  Primary  General  
 Other (specify): Election Cycle-to-Date: 550.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

**C. Smalley, Rick L.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 4909 Alden Rd.  
 City State Zip Code  
 Shawnee KS 66216  
 Date of Receipt  
 03 / 19 / 2008  
 Transaction ID: C-4965-03Lx02  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Bank Midwest Occupation: Banker  
 Receipt For:  Primary  General  
 Other (specify): Election Cycle-to-Date: 1500.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) ..... 1250.00  
 TOTAL This Period (last page this line number only) ..... 91535.00

20020180663

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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 12     13a     13b     14     15

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NAME OF COMMITTEE (in Full)  
PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

**A. Welch, Ted**

Mailing Address

109 Lynnwood Terrace

City

Nashville

State

TN

Zip Code

37205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Finance Chairman

Receipt For:

Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

MM / DD / YYYY  
03 / 19 / 2008

Transaction ID: C-5676-03aS01

Amount of Each Receipt this Period

2300.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. Gerlach, Carl R.**

Mailing Address

10084 Hemlock Dr.

City

Overland Park

State

KS

Zip Code

66212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gill Studios

Occupation  
Business

Receipt For:

Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

MM / DD / YYYY  
03 / 20 / 2008

Transaction ID: C-2109-03Z02

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Hodges, Peter T.**

Mailing Address

1701 Kings Rd.

City

Manhattan

State

KS

Zip Code

66503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Physician

Receipt For:

Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
03 / 20 / 2008

Transaction ID: C-2511-03af01

Amount of Each Receipt this Period

500.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....▶

3800.00

TOTAL This Period (last page this line number only) .....▶

95335.00

28020180664

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

C00128876

**A. Moore, William P.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
10801 Mastin, Suite 920  
City Overland Park State KS Zip Code 66210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Self-Employed  
Receipt For:  Primary  General  Other (specify):  
Election Cycle-to-Date **500.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 20 / 2008**  
Transaction ID: C-3711-03ag01  
Amount of Each Receipt this Period  
**500.00**  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Campbell, Ron**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
1914 N. Cranbrook St.  
City Wichita State KS Zip Code 67206  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Fleeson Gooing Occupation Attorney  
Receipt For:  Primary  General  Other (specify):  
Election Cycle-to-Date **300.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 21 / 2008**  
Transaction ID: C-1006-02C204  
Amount of Each Receipt this Period  
**100.00**  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Carpenter, Kirk W.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
4 Coventry Ct  
City Prairie Village State KS Zip Code 66208  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Insurance  
Receipt For:  Primary  General  Other (specify):  
Election Cycle-to-Date **250.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 21 / 2008**  
Transaction ID: C-1033-03al01  
Amount of Each Receipt this Period  
**250.00**  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....  
TOTAL This Period (last page this line number only) .....

**850.00**  
**96185.00**

28020180665

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (in Full)

PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

**A. Cox, Kenya**

Mailing Address

2745 N. Fountain

City

Wichita

State

KS

Zip Code

67200

FEC ID number of contributing federal political committee.

C

Name of Employer

KS Rep. Todd Tiaht

Occupation

District Liaison

Receipt For:

Primary  General  
 Other (specify):

Election Cycle-to-Date

275.00

Date of Receipt

03 / 21 / 2008

Transaction ID: C-1306-03Xv02

Amount of Each Receipt this Period

250.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. Dunn Jr., William H.**

Mailing Address

5300 Mission Woods Rd.

City

Mission Woods

State

KS

Zip Code

66205

FEC ID number of contributing federal political committee.

C

Name of Employer

J E Dunn Const

Occupation

Contractor

Receipt For:

Primary  General  
 Other (specify):

Election Cycle-to-Date

1000.00

Date of Receipt

03 / 21 / 2008

Transaction ID: C-1640-01oz03

Amount of Each Receipt this Period

500.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Falic, Jana**

Mailing Address

150 Harbour Way

City

Bal Harbour

State

FL

Zip Code

33154

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Homemaker

Receipt For:

Primary  General  
 Other (specify):

Election Cycle-to-Date

4600.00

Date of Receipt

03 / 21 / 2008

Transaction ID: C-1804-03am01

Amount of Each Receipt this Period

2300.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional)

3050.00

TOTAL This Period (last page this line number only)

99235.00

28020180500

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Falic, Jana</b>		Date of Receipt MM / DD / YYYY 03 / 21 / 2008
Mailing Address 150 Harbour Way		Transaction ID: C-1805-03am02
City Bal Harbour	State FL	Zip Code 33154
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2300.00
Name of Employer Self-Employed	Occupation Homemaker	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 4600.00	

Full Name (Last, First, Middle Initial) <b>B. Golden, John</b>		Date of Receipt MM / DD / YYYY 03 / 21 / 2008
Mailing Address PO Box 330		Transaction ID: C-2160-00MP04
City Goodland	State KS	Zip Code 67735
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Farmer	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>C. Huddleston, Lee</b>		Date of Receipt MM / DD / YYYY 03 / 21 / 2008
Mailing Address 6940 Belinder		Transaction ID: C-2604-01BH06
City Shawnee Mission	State KS	Zip Code 66208
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional) .....	3300.00
TOTAL This Period (last page this line number only) .....	102535.00

28020180667

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
	12		13a		13b		14		

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NAME OF COMMITTEE (in Full)

PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

**A.** Karlin, Ronald J.

Mailing Address

10855 W. 176th Terr.

City

Olathe

State

KS

Zip Code

66062

FEC ID number of contributing federal political committee.

C

Name of Employer

Emergency Medicine Care, LLC

Occupation

Physician

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY  
03 / 21 / 2008

Transaction ID: C-2846-03ap01

Amount of Each Receipt this Period

2000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B.** Kruckenberg, Homer

Mailing Address

1604 Monroe St

City

Great Bend

State

KS

Zip Code

67530

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired Teacher

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
03 / 21 / 2008

Transaction ID: C-3074-00XQ05

Amount of Each Receipt this Period

250.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C.** Landoll, Donald R.

Mailing Address

1201 N. 16th Street

City

Marysville

State

KS

Zip Code

66508

FEC ID number of contributing federal political committee.

C

Name of Employer

Landoll Corp.

Occupation

Chairman

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

MM / DD / YYYY  
03 / 21 / 2008

Transaction ID: C-3123-02nW06

Amount of Each Receipt this Period

500.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

2750.00

TOTAL This Period (last page this line number only) .....

105285.00

2802018056

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Lebsack, Wayne**

Full Name (Last, First, Middle Initial)

Mailing Address  
603 S. Douglas Ave.

City Lyons State KS Zip Code 67554

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Self-Employed Occupation  
Petroleum Geologist

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **2150.00**

Date of Receipt  
03 / 21 / 2008

Transaction ID: C-3169-00Y10C

Amount of Each Receipt this Period  
**500.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Massey, Michael J.**

Full Name (Last, First, Middle Initial)

Mailing Address  
4319 S.W. Aylesbury Rd.

City Topeka State KS Zip Code 66610

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Collective Brands, Inc. Occupation  
General Council

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **500.00**

Date of Receipt  
03 / 21 / 2008

Transaction ID: C-3404-03ak01

Amount of Each Receipt this Period  
**500.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Matlock, Pamela**

Full Name (Last, First, Middle Initial)

Mailing Address  
1609 Oxford Ct

City Andover State KS Zip Code 67002

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Self-Employed Occupation  
Homemaker

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **250.00**

Date of Receipt  
03 / 21 / 2008

Transaction ID: C-3410-02lz02

Amount of Each Receipt this Period  
**250.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**SUBTOTAL** of Receipts This Page (optional) **1250.00**

**TOTAL** This Period (last page this line number only) **106535.00**

28020180660

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Rubel, Matthew**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 2100 West 59th Street  
 City Mission Hills State KS Zip Code 66208  
 Date of Receipt 03 / 21 / 2008  
 Transaction ID: C-4601-03Px02  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Payless Shoe Source Occupation CEO/Pres  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date 2000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Shaw, Dick A.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 10405 Howe Lane  
 City Leawood State KS Zip Code 66206  
 Date of Receipt 03 / 21 / 2008  
 Transaction ID: C-4860-03ai01  
 Amount of Each Receipt this Period 2300.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Shaw Electric Company Occupation CEO  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date 2500.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Shaw, Dick A.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 10405 Howe Lane  
 City Leawood State KS Zip Code 66206  
 Date of Receipt 03 / 21 / 2008  
 Transaction ID: C-4861-03ai02  
 Amount of Each Receipt this Period 200.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Shaw Electric Company Occupation CEO  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date 2500.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 3500.00  
 TOTAL This Period (last page this line number only) ..... 110035.00

28020180670

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Shaw, Virginia**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
10405 Howe Lane

City **Leawood** State **KS** Zip Code **66200**

FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer **Self-Employed** Occupation **Domestic Engineer**

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **4500.00**

Date of Receipt **03 / 21 / 2008**

Transaction ID: **C-4865-03MA02**

Amount of Each Receipt this Period **300.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Shaw, Virginia**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
10405 Howe Lane

City **Leawood** State **KS** Zip Code **66200**

FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer **Self-Employed** Occupation **Domestic Engineer**

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **4500.00**

Date of Receipt **03 / 21 / 2008**

Transaction ID: **C-4866-03MA03**

Amount of Each Receipt this Period **2200.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Stewart, Jon L.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
12200 W. 105th St

City **Overland Park** State **KS** Zip Code **66215**

FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer **Metcalf Bank** Occupation **Banker**

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **3750.00**

Date of Receipt **03 / 21 / 2008**

Transaction ID: **C-5137-02NA05**

Amount of Each Receipt this Period **550.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... **3050.00**

**TOTAL** This Period (last page this line number only) ..... **113085.00**

28020180671

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Stewart, Jon L.**

Full Name (Last, First, Middle Initial)

Mailing Address  
12200 W. 105th St

City Overland Park State KS Zip Code 66215

FEC ID number of contributing federal political committee. **C**

Name of Employer Metcalf Bank Occupation Banker

Receipt For:  Primary  General  Other (specify):

Election Cycle-to-Date **3750.00**

Date of Receipt **03 / 21 / 2008**

Transaction ID: C-5138-02NA06

Amount of Each Receipt this Period **1450.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Treff, Douglas J.**

Full Name (Last, First, Middle Initial)

Mailing Address  
1708 Prestwick Dr.

City Lawrence State KS Zip Code 66047

FEC ID number of contributing federal political committee. **C**

Name of Employer Collective Brands, Inc. Occupation SVP

Receipt For:  Primary  General  Other (specify):

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 21 / 2008**

Transaction ID: C-5408-03aj01

Amount of Each Receipt this Period **500.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Melcher, Harold S.**

Full Name (Last, First, Middle Initial)

Mailing Address  
800 W. 47th St.

City Kansas City State MO Zip Code 64112

FEC ID number of contributing federal political committee. **C**

Name of Employer Cereal Food Processors Occupation Retired

Receipt For:  Primary  General  Other (specify):

Election Cycle-to-Date **3000.00**

Date of Receipt **03 / 22 / 2008**

Transaction ID: C-3551-02cu03

Amount of Each Receipt this Period **300.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) **2250.00**

TOTAL This Period (last page this line number only) **115335.00**

28020180672

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	
							<input type="checkbox"/>	15

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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

C00128876

Full Name (Last, First, Middle Initial)

**A. Melcher, Harold S.**

Mailing Address

800 W. 47th St.

City

Kansas City

State

MO

Zip Code

64112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cereal Food Processors

Occupation  
Retired

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY  
03 / 22 / 2008

Transaction ID: C-3552-02cu04

Amount of Each Receipt this Period

700.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. Talley, M. Gary**

Mailing Address

4609 W. 113TH Terrace

City

Leawood

State

KS

Zip Code

66211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

MM / DD / YYYY  
03 / 22 / 2008

Transaction ID: C-5250-00tY06

Amount of Each Receipt this Period

800.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Talley, M. Gary**

Mailing Address

4609 W. 113TH Terrace

City

Leawood

State

KS

Zip Code

66211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

MM / DD / YYYY  
03 / 22 / 2008

Transaction ID: C-5251-00tY07

Amount of Each Receipt this Period

1200.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

2700.00

TOTAL This Period (last page this line number only) .....

118035.00

28020180673

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Burnett, Deanne L.**

Full Name (Last, First, Middle Initial)

Mailing Address  
PO Box 1

City Larned State KS Zip Code 67550

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Homemaker

Receipt For:  Primary  General  Other (specify):

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 25 / 2008**

Transaction ID: C-945-03cL01

Amount of Each Receipt this Period **250.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Ebert, James E.**

Full Name (Last, First, Middle Initial)

Mailing Address  
5680 N. K-99 Hwy

City Wamego State KS Zip Code 66547

FEC ID number of contributing federal political committee. **C**

Name of Employer Reed Co - Ebert Const. Occupation Equipment Sales

Receipt For:  Primary  General  Other (specify):

Election Cycle-to-Date **300.00**

Date of Receipt **03 / 25 / 2008**

Transaction ID: C-1669-01jJ09

Amount of Each Receipt this Period **50.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Heidrick, Max M.**

Full Name (Last, First, Middle Initial)

Mailing Address  
320 W Main St.

City Beloit State KS Zip Code 67420

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Pharmacist

Receipt For:  Primary  General  Other (specify):

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 25 / 2008**

Transaction ID: C-2405-03cd01

Amount of Each Receipt this Period **250.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... **550.00**

TOTAL This Period (last page this line number only) ..... **118585.00**

2802018067A

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Larrabee, William**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 220 Canna Ln  
 City: Liberal State: KS Zip Code: 67901  
 Date of Receipt: 03 / 25 / 2008  
 Transaction ID: C-3132-03cD01  
 Amount of Each Receipt this Period: 250.00  
 Name of Employer: None Occupation: Retired  
 Receipt For:  Primary  General  
 Election Cycle-to-Date: 250.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Aubuchon, Mary C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 15853 Linden St.  
 City: Overland Park State: KS Zip Code: 66224  
 Date of Receipt: 03 / 26 / 2008  
 Transaction ID: C-266-02VWL05  
 Amount of Each Receipt this Period: 50.00  
 Name of Employer: None Occupation: Retired  
 Receipt For:  Primary  General  
 Election Cycle-to-Date: 225.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Barton, Breck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 4904 W. 132ND St.  
 City: Shawnee Mission State: KS Zip Code: 66209  
 Date of Receipt: 03 / 26 / 2008  
 Transaction ID: C-507-02B704  
 Amount of Each Receipt this Period: 1000.00  
 Name of Employer: Cereal Food Processors, Inc. Occupation: President of Company  
 Receipt For:  Primary  General  
 Election Cycle-to-Date: 1000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 1300.00  
 TOTAL This Period (last page this line number only) ..... 119885.00

28020180675

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15
	12		13a		13b		14				

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Beal, M. J.</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2008	
Mailing Address 25614 E. Shadybrook Lane		Transaction ID: C-544-03at01	
City Lee's Summit	State MO	Zip Code 64086	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <input type="checkbox"/>	
Name of Employer Ball's Food Store	Occupation CFO	Election Cycle-to-Date 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

Full Name (Last, First, Middle Initial) <b>B. Beehler, Mike</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2008	
Mailing Address 5248 West 129TH Terrace		Transaction ID: C-569-03P402	
City Leawood	State KS	Zip Code 66209	Amount of Each Receipt this Period 270.00
FEC ID number of contributing federal political committee. C		Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <input type="checkbox"/>	
Name of Employer Burns & McDonnell	Occupation Engineer	Election Cycle-to-Date 370.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

Full Name (Last, First, Middle Initial) <b>C. Berger, Richard N.</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2008	
Mailing Address 200 N. Berger		Transaction ID: C-607-025e05	
City Atchison	State KS	Zip Code 66002	Amount of Each Receipt this Period 750.00
FEC ID number of contributing federal political committee. C		Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <input type="checkbox"/>	
Name of Employer Berger Co.	Occupation Leather Sales-Berger Co. President	Election Cycle-to-Date 2500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) .....	2020.00
TOTAL This Period (last page this line number only) .....	121905.00

28020180676

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	
							<input type="checkbox"/>	15

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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

C00128876

Full Name (Last, First, Middle Initial) <b>A. Brock, Debbie</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2008	
Mailing Address 1008 Cedar Ln		Transaction ID: C-876-03Bc02	
City Pittsburg	State KS	Zip Code 66762	Amount of Each Receipt this Period 2300.00
FEC ID number of contributing federal political committee. C		Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <input type="checkbox"/>	
Name of Employer Names and Numbers	Occupation CFO	Election Cycle-to-Date 4600.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

Full Name (Last, First, Middle Initial) <b>B. Brock, Ken</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2008	
Mailing Address P. O. Box 1479, 1008 Cedar Ln		Transaction ID: C-881-032c04	
City Pittsburg	State KS	Zip Code 66762	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <input type="checkbox"/>	
Name of Employer Names and Numbers	Occupation President/Owner	Election Cycle-to-Date 4600.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

Full Name (Last, First, Middle Initial) <b>C. Butler, Bernard F.</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2008	
Mailing Address 1700 Sunny Slope Ln		Transaction ID: C-961-01qY0A	
City Manhattan	State KS	Zip Code 66502	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <input type="checkbox"/>	
Name of Employer Self-Employed	Occupation Pizza Hut Franchisee	Election Cycle-to-Date 4000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) .....

3600.00

TOTAL This Period (last page this line number only) .....

125505.00

28020180677

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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11a  11b  11c  11d  
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Chandler, George**  
Full Name (Last, First, Middle Initial)  
Mailing Address: PO Box N  
City: Pratt State: KS Zip Code: 67124  
FEC ID number of contributing federal political committee: **C**  
Name of Employer: First National Bank of Pratt Occupation: Banker  
Receipt For:  Primary  General  Other (specify):  
Election Cycle-to-Date: 2200.00  
Date of Receipt: 03 / 26 / 2008  
Transaction ID: C-1089-00Ck0F  
Amount of Each Receipt this Period: 200.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Coker, Ron L.**  
Full Name (Last, First, Middle Initial)  
Mailing Address: 13232 Windsor  
City: Leawood State: KS Zip Code: 66209  
FEC ID number of contributing federal political committee: **C**  
Name of Employer: Burns & McDonnell Occupation: Associate VP  
Receipt For:  Primary  General  Other (specify):  
Election Cycle-to-Date: 270.00  
Date of Receipt: 03 / 26 / 2008  
Transaction ID: C-1180-03b401  
Amount of Each Receipt this Period: 270.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Coyle, James A.**  
Full Name (Last, First, Middle Initial)  
Mailing Address: 10787 S Cedar Niles Cir  
City: Olathe State: KS Zip Code: 66061  
FEC ID number of contributing federal political committee: **C**  
Name of Employer: Self-Employed Occupation: Real Estate  
Receipt For:  Primary  General  Other (specify):  
Election Cycle-to-Date: 1000.00  
Date of Receipt: 03 / 26 / 2008  
Transaction ID: C-1309-03aw01  
Amount of Each Receipt this Period: 1000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) .....

1470.00  
126975.00

28020180578

**\*SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	
	12		13a		13b		14		15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Dobbins, Amy M.</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2008
Mailing Address 26721 W. 108TH Ter		Transaction ID: C-1567-02fJ03
City Olathe	State KS	Zip Code 66061
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Housewife	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Duke, Leslie</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2008
Mailing Address 131 Mariner Cove Ct.		Transaction ID: C-1618-03ax01
City League City	State TX	Zip Code 77573
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 270.00
Name of Employer Burns and McDonnell	Occupation Officer	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C. Dunn, Robert P.</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2008
Mailing Address 8017 Juniper		Transaction ID: C-1630-03b801
City Prairie Village	State KS	Zip Code 66208
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer JE DunnConst. Co.	Occupation VP Community Affairs	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) .....	1520.00
TOTAL This Period (last page this line number only) .....	128495.00

28029180679

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Erdman, Warren**

Full Name (Last, First, Middle Initial)  
Mailing Address  
1015 Arno Rd.  
City State Zip Code  
Kansas City MO 64113

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Kansas City Southern SVP Corp Affairs

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date  
1500.00

Date of Receipt  
03 / 26 / 2008  
Transaction ID: C-1752-02rV02

Amount of Each Receipt this Period  
1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Fischer, Paul**

Full Name (Last, First, Middle Initial)  
Mailing Address  
444 Sugarfoot St.  
City State Zip Code  
Castle Rock CO 80104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Burns McDonald Engineer

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date  
270.00

Date of Receipt  
03 / 26 / 2008  
Transaction ID: C-1897-03b001

Amount of Each Receipt this Period  
270.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Folta, Michael J.**

Full Name (Last, First, Middle Initial)  
Mailing Address  
829 Lange St.  
City State Zip Code  
Mundelein IL 60060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Burns & McDonnell Associate VP

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date  
270.00

Date of Receipt  
03 / 26 / 2008  
Transaction ID: C-1930-03b501

Amount of Each Receipt this Period  
270.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 1540.00

TOTAL This Period (last page this line number only) ..... 130035.00

28020180680



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Hodgdon, Robert E.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 21405 W 73rd Terr  
 City: Shawnee State: KS Zip Code: 66218  
 Date of Receipt: 03 / 26 / 2008  
 Transaction ID: C-2510-03av01  
 Amount of Each Receipt this Period: 1000.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Hodgdon Company, Inc. Occupation: Executive  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 1000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Kassebaum, Nancy Landon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 2750 Z Ave  
 City: Burdick State: KS Zip Code: 66838  
 Date of Receipt: 03 / 26 / 2008  
 Transaction ID: C-2848-03b701  
 Amount of Each Receipt this Period: 500.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: None Occupation: Retired  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 500.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Klover, Richard A.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 11339 Noland St  
 City: Overland Park State: KS Zip Code: 66213  
 Date of Receipt: 03 / 26 / 2008  
 Transaction ID: C-2972-03b101  
 Amount of Each Receipt this Period: 270.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Burns & McDonnell Occupation: Associate VP  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 270.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 1770.00  
 TOTAL This Period (last page this line number only) ..... 134305.00

28020180582

**SCHEDULE A (FEC Form 3)  
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Use separate schedule(s)  
for each category of the  
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13a     11c  
13b     11d  
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. Lemmer, Kevin</b>		Date of Receipt MM / DD / YYYY <b>03 / 26 / 2008</b>
Mailing Address <b>140 Downey Drive</b>		Transaction ID: <b>C-3189-03b101</b>
City <b>Tenafly</b>	State <b>NJ</b>	Zip Code <b>07670</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>ADAR Investments Mgmt</b>	Occupation <b>Finance</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>250.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Lerner, Michael</b>		Date of Receipt MM / DD / YYYY <b>03 / 26 / 2008</b>
Mailing Address <b>6501 W. 106TH St.</b>		Transaction ID: <b>C-3194-038a02</b>
City <b>Overland Park</b>	State <b>KS</b>	Zip Code <b>66212</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>800.00</b>
Name of Employer <b>Law Office of Mick Lerner</b>	Occupation <b>Partner/Attorney</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>4000.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Lerner, Michael</b>		Date of Receipt MM / DD / YYYY <b>03 / 26 / 2008</b>
Mailing Address <b>6501 W. 106TH St.</b>		Transaction ID: <b>C-3195-038a03</b>
City <b>Overland Park</b>	State <b>KS</b>	Zip Code <b>66212</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1700.00</b>
Name of Employer <b>Law Office of Mick Lerner</b>	Occupation <b>Partner/Attorney</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>4000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>2750.00</b>
TOTAL This Period (last page this line number only) .....	<b>137055.00</b>

28020180683

**SCHEDULE A (FEC Form 3)  
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Use separate schedule(s)  
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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

**C00128876**

**A. Mather, Donald R.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
11300 W. 121st Street  
City State Zip Code  
Overland Park KS 66213  
FEC ID number of contributing federal political committee.  C  
Name of Employer Occupation  
Mather Construction Owner  
Receipt For:  Primary  General  
 Other (specify):  
Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2008  
Transaction ID: C-3407-03au01  
Amount of Each Receipt this Period  
1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Mather, Ronald A.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
14160 W. 107th Street  
City State Zip Code  
Lenexa KS 66215  
FEC ID number of contributing federal political committee.  C  
Name of Employer Occupation  
Ronald A Mather Construction Owner  
Receipt For:  Primary  General  
 Other (specify):  
Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2008  
Transaction ID: C-3408-03as01  
Amount of Each Receipt this Period  
1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Mattson, David F.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
2144 W. 114TH Terrace  
City State Zip Code  
Leawood KS 66211  
FEC ID number of contributing federal political committee.  C  
Name of Employer Occupation  
Cereal Food Processors Vice Chairman  
Receipt For:  Primary  General  
 Other (specify):  
Election Cycle-to-Date  
1100.00

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2008  
Transaction ID: C-3423-02BG08  
Amount of Each Receipt this Period  
1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

140055.00

2002018068A

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. Reilly, Jerome E.</b>		Date of Receipt MM / DD / YYYY <b>03 / 26 / 2008</b>
Mailing Address <b>608 Delaware</b>		Transaction ID: <b>C-4403-03RG02</b>
City <b>Leavenworth</b>	State <b>KS</b>	Zip Code <b>66048</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>Reilly &amp; Sons</b>	Occupation <b>Insurance/Real Estate</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>750.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Reilly, Jerry</b>		Date of Receipt MM / DD / YYYY <b>03 / 26 / 2008</b>
Mailing Address <b>2115 Lecompton Road</b>		Transaction ID: <b>C-4409-01TU09</b>
City <b>Leavenworth</b>	State <b>KS</b>	Zip Code <b>66048</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>Reilly &amp; Sons, Inc.</b>	Occupation <b>President</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>3500.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Riordan, Robert F.</b>		Date of Receipt MM / DD / YYYY <b>03 / 26 / 2008</b>
Mailing Address <b>2916 Westdale Rd.</b>		Transaction ID: <b>C-4466-02q703</b>
City <b>Lawrence</b>	State <b>KS</b>	Zip Code <b>66049</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>300.00</b>
Name of Employer <b>Westdale Consulting Inc</b>	Occupation <b>Consultant</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>2300.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>800.00</b>
TOTAL This Period (last page this line number only) .....	<b>140855.00</b>

28020180085

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	
							<input type="checkbox"/>	15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Rossman, Richard G.</b>		Date of Receipt 03 / 26 / 2008	
Mailing Address PO Box 582		Transaction ID: C-4578-01R40B	
City Olathe	State KS	Zip Code 66051	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <input type="checkbox"/>	
Name of Employer Crawford Sales Inc.	Occupation Wholesale Beer Distributor	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
Election Cycle-to-Date 1500.00			

Full Name (Last, First, Middle Initial) <b>B. Taylor, M. H.</b>		Date of Receipt 03 / 26 / 2008	
Mailing Address 12108 Wenonga LN.		Transaction ID: C-5270-03az01	
City Leawood	State KS	Zip Code 66209	Amount of Each Receipt this Period 270.00
FEC ID number of contributing federal political committee. C		Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <input type="checkbox"/>	
Name of Employer Burns & McDonnell	Occupation CFO	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
Election Cycle-to-Date 270.00			

Full Name (Last, First, Middle Initial) <b>C. Tindall, Robert F.</b>		Date of Receipt 03 / 26 / 2008	
Mailing Address 2800 SW Valley Brook Ln		Transaction ID: C-5387-03cw01	
City Topeka	State KS	Zip Code 66614	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <input type="checkbox"/>	
Name of Employer None	Occupation Retired	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
Election Cycle-to-Date 250.00			

SUBTOTAL of Receipts This Page (optional) .....	770.00
TOTAL This Period (last page this line number only) .....	141625.00

28020180680

**SCHEDULE A (FEC Form 3)  
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. Washam, Breck R.**

Mailing Address  
646 Andante Dr.

City State Zip Code  
Ballwin MO 63011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Burns McDonnell Office Manager, Associate VP

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **270.00**

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2008

Transaction ID: C-5632-03b201

Amount of Each Receipt this Period  
**270.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. Weyforth, Frank G**

Mailing Address  
10524 Farley St

City State Zip Code  
Overland Park KS 66212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Weyforth- Haase Chairman

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **250.00**

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2008

Transaction ID: C-5726-03ct01

Amount of Each Receipt this Period  
**250.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. Wilkinson, Steve**

Mailing Address  
15353 Carter Rd.

City State Zip Code  
Overland Park KS 66221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Menorah Medical Center Hospital Admin

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **2000.00**

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2008

Transaction ID: C-5789-00zZ02

Amount of Each Receipt this Period  
**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

**1520.00**

TOTAL This Period (last page this line number only) .....

**143145.00**

2802018000

**SCHEDULE A (FEC Form 3)  
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Use separate schedule(s)  
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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Wilkinson, Steve</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2008
Mailing Address 15353 Carter Rd.		Transaction ID: C-5790-00zZ03
City Overland Park	State KS	Zip Code 66221
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Menorah Medical Center	Occupation Hospital Admin	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. Williams, Jimmy B.</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2008
Mailing Address 9 Rachel's Court		Transaction ID: C-5801-03b301
City Killingworth	State CT	Zip Code 06419
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 270.00
Name of Employer Burns & McDonnell	Occupation Assistant VP	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>C. Willis, Tom</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2008
Mailing Address 901 Apollo St		Transaction ID: C-5811-03b901
City Liberal	State KS	Zip Code 67901
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Conestoga Energy	Occupation CEO	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	1770.00
TOTAL This Period (last page this line number only) .....	144915.00

200201000000

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Womack, Walter C.**

Full Name (Last, First, Middle Initial)

Mailing Address  
10325 Cherokee LN  
City Leawood State KS Zip Code 66206

FEC ID number of contributing federal political committee. **C**

Name of Employer **Burns & McDonnell** Occupation **President**

Receipt For:  Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **270.00**

Date of Receipt **03 / 26 / 2008**  
Transaction ID: **C-5862-03ay01**

Amount of Each Receipt this Period **270.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Anning, Douglas**

Full Name (Last, First, Middle Initial)

Mailing Address  
5612 Belinder Rd  
City Fairway State KS Zip Code 66205

FEC ID number of contributing federal political committee. **C**

Name of Employer **Polsinelli** Occupation **Shareholder**

Receipt For:  Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **500.00**

Date of Receipt **03 / 27 / 2008**  
Transaction ID: **C-193-03bY01**

Amount of Each Receipt this Period **500.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Armstrong, Jay**

Full Name (Last, First, Middle Initial)

Mailing Address  
4528 Bourbon Rd.  
City Muscotah State KS Zip Code 66058

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Farmer**

Receipt For:  Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **500.00**

Date of Receipt **03 / 27 / 2008**  
Transaction ID: **C-213-01hf04**

Amount of Each Receipt this Period **500.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... **1270.00**

**TOTAL** This Period (last page this line number only) ..... **146185.00**

28020180689

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Bartlett, Richard A.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 15345 Knox St.  
 City: Overland Park State: KS Zip Code: 66221  
 Date of Receipt: 03 / 27 / 2008  
 Transaction ID: C-506-01Fe02  
 Amount of Each Receipt this Period: 2000.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Self-Employed Occupation: Finance  
 Receipt For:  Primary  General  
 Other (specify):  
 Election Cycle-to-Date: 2000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Berger, Deborah**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 24 Sutton Place  
 City: Englewood State: NJ Zip Code: 07631  
 Date of Receipt: 03 / 27 / 2008  
 Transaction ID: C-604-03bR01  
 Amount of Each Receipt this Period: 300.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Medical Office Occupation: Office Manager  
 Receipt For:  Primary  General  
 Other (specify):  
 Election Cycle-to-Date: 300.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Boszhardt, Douglas S.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 1351 Francisco  
 City: San Francisco State: CA Zip Code: 94123  
 Date of Receipt: 03 / 27 / 2008  
 Transaction ID: C-799-03bh01  
 Amount of Each Receipt this Period: 1000.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Deutsche Bank Occupation: Managing Director  
 Receipt For:  Primary  General  
 Other (specify):  
 Election Cycle-to-Date: 1000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 3300.00  
 TOTAL This Period (last page this line number only) ..... 149485.00

28020180600

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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X 11a 11b 11c 11d 12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

A. Brandmeyer, A. Joseph

Mailing Address

6416 Aberdeen Dr.

City

Mission Hills

State

KS

Zip Code

66208

FEC ID number of contributing federal political committee.

C

Name of Employer Enturia

Occupation Chairman

Receipt For:

X Primary General Other (specify):

Election Cycle-to-Date

4600.00

Date of Receipt

MM/DD/YYYY 03/27/2008

Transaction ID: C-835-03ba01

Amount of Each Receipt this Period

2300.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

B. Brandmeyer, A. Joseph

Mailing Address

6416 Aberdeen Dr.

City

Mission Hills

State

KS

Zip Code

66208

FEC ID number of contributing federal political committee.

C

Name of Employer Enturia

Occupation Chairman

Receipt For:

Primary X General Other (specify):

Election Cycle-to-Date

4600.00

Date of Receipt

MM/DD/YYYY 03/27/2008

Transaction ID: C-836-03ba02

Amount of Each Receipt this Period

2300.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

C. Brandmeyer, John G.

Mailing Address

13204 Delmar St.

City

Leawood

State

KS

Zip Code

66209

FEC ID number of contributing federal political committee.

C

Name of Employer Enturia

Occupation Director of Business Planning

Receipt For:

X Primary General Other (specify):

Election Cycle-to-Date

400.00

Date of Receipt

MM/DD/YYYY 03/27/2008

Transaction ID: C-837-03bZ01

Amount of Each Receipt this Period

400.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

154485.00

28020180601

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)

**A. Capaldi, Michael**

Mailing Address

4675 MacArthur Court, Suite 550

City State Zip Code  
Newport Beach CA 92660

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Spach, Capaldi & Waggaman Attorney

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **1000.00**

Date of Receipt

**03 / 27 / 2008**

Transaction ID: C-1010-03bF01

Amount of Each Receipt this Period

**1000.00**

**MEMO**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

*Lies to Page 102*

Full Name (Last, First, Middle Initial)

**B. Caro Jr., Frank A.**

Mailing Address

6201 College Blvd, Suite 500

City State Zip Code  
Overland Park KS 66211

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Polsinelli Shalton Flanigan Attorney at Law

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **750.00**

Date of Receipt

**03 / 27 / 2008**

Transaction ID: C-1030-03Hm02

Amount of Each Receipt this Period

**500.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Colt, Mack V.**

Mailing Address

3515 W. 75th, Suite 107

City State Zip Code  
Prairie Village KS 66208

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Colt Group, LLC Insurance Sales

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **1000.00**

Date of Receipt

**03 / 27 / 2008**

Transaction ID: C-1206-03bV01

Amount of Each Receipt this Period

**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

**1500.00**

TOTAL This Period (last page this line number only) .....

**155985.00**

28020180592

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Cray Jr., Cloud L.</b>		Date of Receipt MM / DD / YYYY <b>03 / 27 / 2008</b>
Mailing Address 20045 266TH Road		Transaction ID: <b>C-1330-01MU06</b>
City Atchison	State KS	Zip Code 66002
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1300.00</b>
Name of Employer Midwest Grain Prop Co.	Occupation Chairman of Board	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>3600.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Cray Jr., Cloud L.</b>		Date of Receipt MM / DD / YYYY <b>03 / 27 / 2008</b>
Mailing Address 20045 266TH Road		Transaction ID: <b>C-1331-01MU07</b>
City Atchison	State KS	Zip Code 66002
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1300.00</b>
Name of Employer Midwest Grain Prop Co.	Occupation Chairman of Board	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>3600.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Dunn, Peggy J.</b>		Date of Receipt MM / DD / YYYY <b>03 / 27 / 2008</b>
Mailing Address 12008 Ensley Lane		Transaction ID: <b>C-1628-01tv04</b>
City Leawood	State KS	Zip Code 66209
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>300.00</b>
Name of Employer City of Leawood	Occupation Mayor	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>4000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>2900.00</b>
TOTAL This Period (last page this line number only) .....	<b>158885.00</b>

28020180693

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Dunn, Peggy J.**

Full Name (Last, First, Middle Initial)

Mailing Address  
12008 Ensley Lane

City Leawood State KS Zip Code 66209

FEC ID number of contributing federal political committee. **C**

Name of Employer City of Leawood Occupation Mayor

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **4000.00**

Date of Receipt **03 / 27 / 2008**

Transaction ID: C-1629-01tv05

Amount of Each Receipt this Period **1700.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Edwards, Kimberly**

Full Name (Last, First, Middle Initial)

Mailing Address  
and Mr. William R. Wright, 25 Observation Place

City Oakland State CA Zip Code 94611

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **4600.00**

Date of Receipt **03 / 27 / 2008**

Transaction ID: C-1685-03bC01

Amount of Each Receipt this Period **2300.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Edwards, Kimberly**

Full Name (Last, First, Middle Initial)

Mailing Address  
and Mr. William R. Wright, 25 Observation Place

City Oakland State CA Zip Code 94611

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **4600.00**

Date of Receipt **03 / 27 / 2008**

Transaction ID: C-1686-03bC02

Amount of Each Receipt this Period **2300.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**SUBTOTAL** of Receipts This Page (optional) **6300.00**

**TOTAL** This Period (last page this line number only) **165185.00**

28020180607

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14
							15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. Geiger III, E. W.**

Mailing Address  
P. O. Box 50

City State Zip Code  
Leavenworth KS 66048

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Geiger Ready Mix Co. Inc. Chairman\CEO

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify): ▼ **1500.00**

Date of Receipt  
**03 / 27 / 2008**

Transaction ID: **C-2080-02oz03**

Amount of Each Receipt this Period  
**500.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. Greenamyre, Michael**

Mailing Address  
2500 S 2nd St

City State Zip Code  
Leavenworth KS 66048

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Greenamyre Rentals Inc President

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify): ▼ **450.00**

Date of Receipt  
**03 / 27 / 2008**

Transaction ID: **C-2217-03bX01**

Amount of Each Receipt this Period  
**450.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. Hayes, Carol**

Mailing Address  
P. O. Box 108

City State Zip Code  
Attica KS 67009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Oil & Gas Producer

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify): ▼ **450.00**

Date of Receipt  
**03 / 27 / 2008**

Transaction ID: **C-2379-030W04**

Amount of Each Receipt this Period  
**250.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....▶

**1200.00**

TOTAL This Period (last page this line number only) .....▶

**166385.00**

28020180595

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	<input type="checkbox"/>	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Hebenstreit, James B.</b>		Date of Receipt MM / DD / YYYY 03 / 27 / 2008
Mailing Address 5828 Pembroke Ct		Transaction ID: C-2397-01MD05
City Mission Hills	State KS	Zip Code 66208
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2300.00
Name of Employer Bartlett & Co.	Occupation President	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 4600.00	

Full Name (Last, First, Middle Initial) <b>B. Hebenstreit, James B.</b>		Date of Receipt MM / DD / YYYY 03 / 27 / 2008
Mailing Address 5828 Pembroke Ct		Transaction ID: C-2398-01MD06
City Mission Hills	State KS	Zip Code 66208
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2300.00
Name of Employer Bartlett & Co.	Occupation President	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 4600.00	

Full Name (Last, First, Middle Initial) <b>C. Hebenstreit, Marilyn Bartlett</b>		Date of Receipt MM / DD / YYYY 03 / 27 / 2008
Mailing Address 5828 Pembroke Ct		Transaction ID: C-2400-03Rh02
City Mission Hills	State KS	Zip Code 66208
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Linda Hall Library	Occupation Chairperson	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 1400.00	

SUBTOTAL of Receipts This Page (optional) .....	5000.00
TOTAL This Period (last page this line number only) .....	171385.00

28020180600



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Kaaz, Greg</b>		Date of Receipt MM / DD / YYYY <b>03 / 27 / 2008</b>
Mailing Address <b>2130 Lecompton Rd</b>		Transaction ID: <b>C-2825-03SA02</b>
City <b>Leavenworth</b>	State <b>KS</b>	Zip Code <b>66048</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>800.00</b>
Name of Employer <b>Kaaz-Lexaco Const</b>	Occupation <b>Contractor</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>1300.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Kaaz, Stephen L.</b>		Date of Receipt MM / DD / YYYY <b>03 / 27 / 2008</b>
Mailing Address <b>P. O. Box 168</b>		Transaction ID: <b>C-2830-02oy05</b>
City <b>Leavenworth</b>	State <b>KS</b>	Zip Code <b>66048</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>550.00</b>
Name of Employer <b>Kaaz-Lexaco Const.</b>	Occupation <b>Contractor</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>4250.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Kaaz, Stephen L.</b>		Date of Receipt MM / DD / YYYY <b>03 / 27 / 2008</b>
Mailing Address <b>P. O. Box 168</b>		Transaction ID: <b>C-2831-02oy06</b>
City <b>Leavenworth</b>	State <b>KS</b>	Zip Code <b>66048</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1950.00</b>
Name of Employer <b>Kaaz-Lexaco Const.</b>	Occupation <b>Contractor</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>4250.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>3300.00</b>
TOTAL This Period (last page this line number only) .....	<b>176935.00</b>

28020180508

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Kou, Ming Bin</b>		Date of Receipt MM / DD / YYYY 03 / 27 / 2008
Mailing Address 12 Williamsburg Lane		Transaction ID: C-3030-03be01
City Rolling Hills	State CA	Zip Code 90274
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1100.00
Name of Employer Red Chamber Co.	Occupation President	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 1100.00	

Full Name (Last, First, Middle Initial) <b>B. Kou, Ming Shin</b>		Date of Receipt MM / DD / YYYY 03 / 27 / 2008
Mailing Address 1399 Vista Moraga		Transaction ID: C-3031-03bd01
City Bel-Air	State CA	Zip Code 90049
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer Red Chamber Co.	Occupation EVP	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 2300.00	

Full Name (Last, First, Middle Initial) <b>C. Kou, Shu Chin</b>		Date of Receipt MM / DD / YYYY 03 / 27 / 2008
Mailing Address 1399 Vista Moraga		Transaction ID: C-3032-03bc01
City Bel-Air	State CA	Zip Code 90049
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 4600.00	

SUBTOTAL of Receipts This Page (optional) .....	5700.00
TOTAL This Period (last page this line number only) .....	182635.00

28020180600

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Kou, Shu Chin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 1399 Vista Moraga  
 City: Bel-Air State: CA Zip Code: 90049  
 Date of Receipt: 03 / 27 / 2008  
 Transaction ID: C-3033-03bc02  
 Amount of Each Receipt this Period: 2300.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: None Occupation: Retired  
 Receipt For:  Primary  General  
 Election Cycle-to-Date: 4600.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Kozak, Rosalyn E.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 280 Jones Road  
 City: Englewood State: NJ Zip Code: 07631  
 Date of Receipt: 03 / 27 / 2008  
 Transaction ID: C-3041-03bQ01  
 Amount of Each Receipt this Period: 1000.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Englewood Hospital Occupation: Doctor  
 Receipt For:  Primary  General  
 Election Cycle-to-Date: 1000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Kramer, David**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 31672 Paseo Isabella  
 City: San Juan Capistran State: CA Zip Code: 92675  
 Date of Receipt: 03 / 27 / 2008  
 Transaction ID: C-3049-03bG01  
 Amount of Each Receipt this Period: 500.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Kramer & Lawson Inc. Occupation: Structural Engineer  
 Receipt For:  Primary  General  
 Election Cycle-to-Date: 500.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 3800.00  
 TOTAL This Period (last page this line number only) ..... 186435.00

28020180700

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
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Full Name (Last, First, Middle Initial) <b>A. Lindenbaum, Nathan J.</b>		Date of Receipt MM / DD / YYYY <b>03 / 27 / 2008</b>
Mailing Address <b>464 Winthrop Road</b>		Transaction ID: <b>C-3233-03Wn02</b>
City <b>Teaneck</b>	State <b>NJ</b>	Zip Code <b>07666</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>MGS Corporation</b>	Occupation <b>President</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>2000.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Loewen, Robert W.</b>		Date of Receipt MM / DD / YYYY <b>03 / 27 / 2008</b>
Mailing Address <b>730 Bluebird Canyon Drive</b>		Transaction ID: <b>C-3261-03bH01</b>
City <b>Laguna Beach</b>	State <b>CA</b>	Zip Code <b>92651</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>Gibson, Dunn and Crutcher</b>	Occupation <b>Partner/Attorney</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Martin, Richard V.</b>		Date of Receipt MM / DD / YYYY <b>03 / 27 / 2008</b>
Mailing Address <b>15926 LA Linodra Drive</b>		Transaction ID: <b>C-3396-03bb01</b>
City <b>Whittier</b>	State <b>CA</b>	Zip Code <b>90603</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>Red Chamber Co.</b>	Occupation <b>Executive Director</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>1000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>2500.00</b>
TOTAL This Period (last page this line number only) .....	<b>188935.00</b>

28020180701



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Murfin, Janet**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 900 N. Linden St.  
 City State Zip Code  
 Wichita KS 67206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed Homemaker  
 Receipt For:  
 Primary  General  
 Other (specify):   
 Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2008  
 Transaction ID: C-3803-03bT02  
 Amount of Each Receipt this Period  
**200.00**  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Musil, Greg L.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 10721 W. 121ST St.  
 City State Zip Code  
 Overland Park KS 66213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Shughort Thomson & Kilroy Attorney  
 Receipt For:  
 Primary  General  
 Other (specify):   
 Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2008  
 Transaction ID: C-3823-01Bt05  
 Amount of Each Receipt this Period  
**500.00**  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Muss, Jason**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 181 East 90th Street  
 City State Zip Code  
 New York NY 10128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Muss Development Real Estate  
 Receipt For:  
 Primary  General  
 Other (specify):   
 Election Cycle-to-Date **2250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2008  
 Transaction ID: C-3827-03GU02  
 Amount of Each Receipt this Period  
**1000.00**  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... **1700.00**  
 TOTAL This Period (last page this line number only) ..... **195435.00**

28020180703

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. Muss, Joshua L.**

Mailing Address  
118-35 Queens Blvd, 16th Flr

City State Zip Code  
Forest Hills NY 11375

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Muss Development Real Estate

Receipt For:  Primary  General  
 Other (specify):

Election Cycle-to-Date **2000.00**

Date of Receipt **03 / 27 / 2008**

Transaction ID: **C-3829-03GR02**

Amount of Each Receipt this Period **1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. Nelson, Franklin W.**

Mailing Address  
6820 SW 43rd St.

City State Zip Code  
Topeka KS 66610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  
 Other (specify):

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 27 / 2008**

Transaction ID: **C-3899-01FL02**

Amount of Each Receipt this Period **1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. Nicolay, Kenneth M.**

Mailing Address  
5528 Tahoe Ln.

City State Zip Code  
Shawnee Mission KS 66205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Kessinger Hunter Commercial Real Estate

Receipt For:  Primary  General  
 Other (specify):

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 27 / 2008**

Transaction ID: **C-3943-03bU01**

Amount of Each Receipt this Period **250.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) **2250.00**

TOTAL This Period (last page this line number only) **197685.00**

28020180704

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Noda, Barbara**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 101 California Street, 46th Floor  
 City: San Francisco State: CA Zip Code: 94111  
 Date of Receipt: 03 / 27 / 2008  
 Transaction ID: C-3951-03bg01  
 Amount of Each Receipt this Period: 1000.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Deutsche Bank Occupation: Client Advisor  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 1000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Price, Tracy K.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 25241 Rockridge Rd.  
 City: Laguna Hills State: CA Zip Code: 92653  
 Date of Receipt: 03 / 27 / 2008  
 Transaction ID: C-4281-03bl01  
 Amount of Each Receipt this Period: 500.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: The Linc Group Occupation: CEO  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 500.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Prince, David L.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 1912 E. Vernon Ave., Suite 100  
 City: Los Angeles State: CA Zip Code: 90058  
 Date of Receipt: 03 / 27 / 2008  
 Transaction ID: C-4288-03bN01  
 Amount of Each Receipt this Period: 1000.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Self-Employed Occupation: Lawyer  
 Receipt For:  Primary  General  Other (specify):  
 Election Cycle-to-Date: 1000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 2500.00  
 TOTAL This Period (last page this line number only) ..... 200185.00

28020180705

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Reintjes, Stephen L.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 2400 W. 59th Street  
 City: Mission Hills State: KS Zip Code: 66208  
 Date of Receipt: 03 / 27 / 2008  
 Transaction ID: C-4420-03Rk02  
 Amount of Each Receipt this Period: 1000.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Metropolitan Med Society of Occupation: Neurosurgery  
 Receipt For:  Primary  General  
 Other (specify): Election Cycle-to-Date: 1500.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Ross Jr., Frank J.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 3005 W. 117TH Street  
 City: Leawood State: KS Zip Code: 66211  
 Date of Receipt: 03 / 27 / 2008  
 Transaction ID: C-4570-02mi04  
 Amount of Each Receipt this Period: 1000.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Polsinelli Law Firm Occupation: Attorney-Sr. Partner  
 Receipt For:  Primary  General  
 Other (specify): Election Cycle-to-Date: 2250.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Schroeder, James C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 1901 Pine Ridge Drive  
 City: Leavenworth State: KS Zip Code: 66048  
 Date of Receipt: 03 / 27 / 2008  
 Transaction ID: C-4741-026I05  
 Amount of Each Receipt this Period: 250.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Great Western Mfg. Co., Inc. Occupation: Corp. CEO  
 Receipt For:  Primary  General  
 Other (specify): Election Cycle-to-Date: 1250.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 2250.00  
 TOTAL This Period (last page this line number only) ..... 202435.00

28020180708

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Schuster, Deryl**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 27931 W. 87th St. South  
 City: Viola State: KS Zip Code: 67149  
 Date of Receipt: 03 / 27 / 2008  
 Transaction ID: C-4757-00na0G  
 Amount of Each Receipt this Period: 250.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: U.S. Bank Occupation: Commercial Lender  
 Receipt For:  Primary  General  
 Election Cycle-to-Date: 3625.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Sigler, Karl**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 2749 NW Hunter Dr., Ste A  
 City: Blue Springs State: MO Zip Code: 64015  
 Date of Receipt: 03 / 27 / 2008  
 Transaction ID: C-4920-01mn03  
 Amount of Each Receipt this Period: 1000.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Enterprise Interiors Occupation: President  
 Receipt For:  Primary  General  
 Election Cycle-to-Date: 2000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Smith, Larry T.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 1601 Dove Street, Suite 145  
 City: Newport Beach State: CA Zip Code: 92660  
 Date of Receipt: 03 / 27 / 2008  
 Transaction ID: C-4980-03bJ01  
 Amount of Each Receipt this Period: 500.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: MHI Real Company Occupation: President  
 Receipt For:  Primary  General  
 Election Cycle-to-Date: 500.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 1750.00  
 TOTAL This Period (last page this line number only) ..... 204185.00

28020180707

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)

**A. Spach, Capaldi & Waggaman, LLP**

Mailing Address

4675 Macarthur Court, Suite 550

City State Zip Code  
Newport Beach CA 92660

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **1000.00**

Date of Receipt

**03 / 27 / 2008**

Transaction ID: C-5038-03bE01

Amount of Each Receipt this Period

**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. Straub III, Ernest J.**

Mailing Address

5034 Arapahoe St.

City State Zip Code  
Shawnee KS 66226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Straub Construction President

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **2300.00**

Date of Receipt

**03 / 27 / 2008**

Transaction ID: C-5183-01mo03

Amount of Each Receipt this Period

**1300.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Wagner, Richard K.**

Mailing Address

13622 Rushmore Lane

City State Zip Code  
Santa Ana CA 92705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RKW Development President

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **1000.00**

Date of Receipt

**03 / 27 / 2008**

Transaction ID: C-5575-03bK01

Amount of Each Receipt this Period

**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

**3300.00**

TOTAL This Period (last page this line number only) .....

**207485.00**

28020180708

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Williams, Larry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 1513 Heritage Pl  
 City State Zip Code  
 Mc Pherson KS 67460  
 Date of Receipt  
 03 / 27 / 2008  
 Transaction ID: C-5803-00zi04  
 Amount of Each Receipt this Period  
 50.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 None Retired  
 Receipt For:  Primary  General  
 Other (specify):  
 Election Cycle-to-Date  
 1050.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

**B. Winn III, Larry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 8305 Outlook Ln  
 City State Zip Code  
 Overland Park KS 66207  
 Date of Receipt  
 03 / 27 / 2008  
 Transaction ID: C-5841-01Bd06  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Polsinelli, White Attorney  
 Receipt For:  Primary  General  
 Other (specify):  
 Election Cycle-to-Date  
 1000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

**C. Young Jr., Parker J.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 5815 W. 157TH St.  
 City State Zip Code  
 Overland Park KS 66223  
 Date of Receipt  
 03 / 27 / 2008  
 Transaction ID: C-5915-03ME02  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Straub Const. VP  
 Receipt For:  Primary  General  
 Other (specify):  
 Election Cycle-to-Date  
 1000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional) ..... 1050.00  
 TOTAL This Period (last page this line number only) ..... 208535.00

28020180709

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 104 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Barnett, M Yvonne**

Full Name (Last, First, Middle Initial)

Mailing Address  
1400 Lincoln

City Emporia State KS Zip Code 66801

FEC ID number of contributing federal political committee. **C**

Name of Employer Vluе Valley Occupation Teacher

Receipt For:  Primary  General  
 Other (specify):

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 28 / 2008**

Transaction ID: C-476-03bm01

Amount of Each Receipt this Period **500.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Beaham III, Gordon T.**

Full Name (Last, First, Middle Initial)

Mailing Address  
1025 W. 8TH St.

City Kansas City State MO Zip Code 64101

FEC ID number of contributing federal political committee. **C**

Name of Employer Faultless Starch Co. Occupation Chairman

Receipt For:  Primary  General  
 Other (specify):

Election Cycle-to-Date **4600.00**

Date of Receipt **03 / 28 / 2008**

Transaction ID: C-541-01W708

Amount of Each Receipt this Period **2300.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Beaham III, Gordon T.**

Full Name (Last, First, Middle Initial)

Mailing Address  
1025 W. 8TH St.

City Kansas City State MO Zip Code 64101

FEC ID number of contributing federal political committee. **C**

Name of Employer Faultless Starch Co. Occupation Chairman

Receipt For:  Primary  General  
 Other (specify):

Election Cycle-to-Date **4600.00**

Date of Receipt **03 / 28 / 2008**

Transaction ID: C-542-01W709

Amount of Each Receipt this Period **2300.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**SUBTOTAL** of Receipts This Page (optional) **5100.00**

**TOTAL** This Period (last page this line number only) **213635.00**

28020180710

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
	12		13a		13b		14		

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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Collins, A. J.</b>		Date of Receipt MM / DD / YYYY <b>03 / 28 / 2008</b>
Mailing Address <b>700 Monterey Pl</b>		Transaction ID: <b>C-1200-03B203</b>
City <b>Hutchinson</b>	State <b>KS</b>	Zip Code <b>67502</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>200.00</b>	
Name of Employer <b>None</b>	Occupation <b>Retired</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>400.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Dool, Robert</b>		Date of Receipt MM / DD / YYYY <b>03 / 28 / 2008</b>
Mailing Address <b>8951 Boxthorn Ct</b>		Transaction ID: <b>C-1587-01HC06</b>
City <b>Wichita</b>	State <b>KS</b>	Zip Code <b>67226</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>100.00</b>	
Name of Employer <b>Mid-Continent Safety, LLC</b>	Occupation <b>Owner Safety Distributor</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>700.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Eckholt, Robert J.</b>		Date of Receipt MM / DD / YYYY <b>03 / 28 / 2008</b>
Mailing Address <b>11609 Pawnee Lane</b>		Transaction ID: <b>C-1670-03bn01</b>
City <b>Leawood</b>	State <b>KS</b>	Zip Code <b>66211</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>Self-Employed</b>	Occupation <b>CPA</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>1000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>1300.00</b>
TOTAL This Period (last page this line number only) .....	<b>214935.00</b>

28020180711

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
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Full Name (Last, First, Middle Initial) <b>A. Fry, Luther L.</b>		Date of Receipt MM / DD / YYYY <b>03 / 28 / 2008</b>
Mailing Address <b>310 E Walnut St</b>		Transaction ID: <b>C-2029-01OU04</b>
City <b>Garden City</b>	State <b>KS</b>	Zip Code <b>67846</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>300.00</b>
Name of Employer <b>Self-Employed</b>	Occupation <b>Ophthalmologist</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>2500.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Fry, Luther L.</b>		Date of Receipt MM / DD / YYYY <b>03 / 28 / 2008</b>
Mailing Address <b>310 E Walnut St</b>		Transaction ID: <b>C-2030-01OU05</b>
City <b>Garden City</b>	State <b>KS</b>	Zip Code <b>67846</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>200.00</b>
Name of Employer <b>Self-Employed</b>	Occupation <b>Ophthalmologist</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>2500.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Lexo, James</b>		Date of Receipt MM / DD / YYYY <b>03 / 28 / 2008</b>
Mailing Address <b>8422 Sulky Ct</b>		Transaction ID: <b>C-3216-03bj01</b>
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22308</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>300.00</b>
Name of Employer <b>ICRC</b>	Occupation <b>Businessman</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>300.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>215735.00</b>

28020180712

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

**A. Loewen, Robert W.**

Full Name (Last, First, Middle Initial)

Mailing Address  
730 Bluebird Canyon Drive

City      State      Zip Code  
Laguna Beach      CA      92651

FEC ID number of contributing federal political committee.      **C**

Name of Employer      Occupation  
Gibson, Dunn and Crutcher      Partner/Attorney

Receipt For:  
 Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
03 / 28 / 2008

Transaction ID: C-3262-03bH02

Amount of Each Receipt this Period  
500.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Mattingly, Jim**

Full Name (Last, First, Middle Initial)

Mailing Address  
2423 N. Greenleaf

City      State      Zip Code  
Wichita      KS      67223

FEC ID number of contributing federal political committee.      **C**

Name of Employer      Occupation  
Amerimerc LLC      Owner - Sales

Receipt For:  
 Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
1250.00

Date of Receipt  
03 / 28 / 2008

Transaction ID: C-3415-036p03

Amount of Each Receipt this Period  
250.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Mattingly Jr., Charles D.**

Full Name (Last, First, Middle Initial)

Mailing Address  
729 E. Central

City      State      Zip Code  
Wichita      KS      67206

FEC ID number of contributing federal political committee.      **C**

Name of Employer      Occupation  
Amerimerc LLC      Owner

Receipt For:  
 Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
03 / 28 / 2008

Transaction ID: C-3420-035g03

Amount of Each Receipt this Period  
250.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 1000.00

TOTAL This Period (last page this line number only) ..... 216735.00

28020180715

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Merrill Jr., Fred L.</b>		Date of Receipt MM / DD / YYYY <b>03 / 28 / 2008</b>
Mailing Address <b>12803 Walmer</b>		Transaction ID: <b>C-3575-017X0G</b>
City <b>Overland Park</b>	State <b>KS</b>	Zip Code <b>66209</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>200.00</b>
Name of Employer <b>Merrill Development Co</b>	Occupation <b>Real Estate Development</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>4100.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Merrill Jr., Fred L.</b>		Date of Receipt MM / DD / YYYY <b>03 / 28 / 2008</b>
Mailing Address <b>12803 Walmer</b>		Transaction ID: <b>C-3576-017X0H</b>
City <b>Overland Park</b>	State <b>KS</b>	Zip Code <b>66209</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1800.00</b>
Name of Employer <b>Merrill Development Co</b>	Occupation <b>Real Estate Development</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>4100.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Napper, Richard A.</b>		Date of Receipt MM / DD / YYYY <b>03 / 28 / 2008</b>
Mailing Address <b>13210 Beverly St.</b>		Transaction ID: <b>C-3843-03bo01</b>
City <b>Overland Park</b>	State <b>KS</b>	Zip Code <b>66209</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>Merrill Companies</b>	Occupation <b>Real Estate Developer</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>1000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>3000.00</b>
TOTAL This Period (last page this line number only) .....	<b>219735.00</b>

28020180714

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

**A. Schields, Fred**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 7315 Hwy 27  
 City: Goodland      State: KS      Zip Code: 67735  
 Date of Receipt: 03 / 29 / 2008  
 Transaction ID: C-4696-02gy02  
 Amount of Each Receipt this Period: 250.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: F & J Farms      Occupation: Owner-Ag Producer  
 Receipt For:  Primary     General  
 Other (specify):      Election Cycle-to-Date: 250.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Schields, Jeanie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 7315 Hwy 27  
 City: Goodland      State: KS      Zip Code: 67735  
 Date of Receipt: 03 / 29 / 2008  
 Transaction ID: C-4700-016L06  
 Amount of Each Receipt this Period: 250.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Self-Employed      Occupation: Owner(F&J Farms)  
 Receipt For:  Primary     General  
 Other (specify):      Election Cycle-to-Date: 1550.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Taggart, Bill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 2341 S. Ode Street  
 City: Arlington      State: VA      Zip Code: 22201  
 Date of Receipt: 03 / 29 / 2008  
 Transaction ID: C-5235-01GY02  
 Amount of Each Receipt this Period: 500.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: JT&A, Inc.      Occupation: Consultant  
 Receipt For:  Primary     General  
 Other (specify):      Election Cycle-to-Date: 500.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 1000.00  
 TOTAL This Period (last page this line number only) ..... 220735.00

28020180715

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial)  
**A. Atsinger III, Edward G.**

Mailing Address  
4880 Santa Rosa Road  
City: Camarillo      State: CA      Zip Code: 93012

FEC ID number of contributing federal political committee: **C**

Name of Employer: Salem Communications Corp      Occupation: CEO

Receipt For:  
 Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼: 1000.00

Date of Receipt: 03 / 31 / 2008  
Transaction ID: C-256-03c401

Amount of Each Receipt this Period: 1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. Berger, Richard N.**

Mailing Address  
200 N. Berger  
City: Atchison      State: KS      Zip Code: 66002

FEC ID number of contributing federal political committee: **C**

Name of Employer: Berger Co.      Occupation: Leather Sales-Berger Co. President

Receipt For:  
 Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼: 2500.00

Date of Receipt: 03 / 31 / 2008  
Transaction ID: C-608-025e06

Amount of Each Receipt this Period: 250.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. Dailey, Marilyn Jean**

Mailing Address  
1657 Vladic Lane  
City: Escondido      State: CA      Zip Code: 92027

FEC ID number of contributing federal political committee: **C**

Name of Employer: None      Occupation: Retired

Receipt For:  
 Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼: 250.00

Date of Receipt: 03 / 31 / 2008  
Transaction ID: C-1408-02Cf01

Amount of Each Receipt this Period: 250.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 1500.00

TOTAL This Period (last page this line number only) ..... 222235.00

28020180718

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 111 OF 116

11a  
12     11b  
13a     11c  
13b     11d  
14     15

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NAME OF COMMITTEE (in Full)

PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

**A. Davidson, Lysle**

Mailing Address

P.O. Box 418

City

Johnson

State

KS

Zip Code

67855

FEC ID number of contributing federal political committee.

C

Name of Employer

Western Shelter Insurance Inc.

Occupation

Insurance Agent

Receipt For:

Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

03 / 31 / 2008

Transaction ID: C-1434-03c501

Amount of Each Receipt this Period

2000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. Dennis, Matt**

Mailing Address

8309 Outlook Lane

City

Overland Park

State

KS

Zip Code

66207

FEC ID number of contributing federal political committee.

C

Name of Employer

Polsinelli Law Firm

Occupation

Attorney

Receipt For:

Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

03 / 31 / 2008

Transaction ID: C-1506-02mg02

Amount of Each Receipt this Period

500.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Eldred, Kenneth**

Mailing Address

3000 Sand Hill Road, BI-145

City

Menlo Park

State

CA

Zip Code

94025

FEC ID number of contributing federal political committee.

C

Name of Employer

Living Stones Foundation

Occupation

Chairman/CEO

Receipt For:

Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

03 / 31 / 2008

Transaction ID: C-1699-03by01

Amount of Each Receipt this Period

2300.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

4800.00

TOTAL This Period (last page this line number only) .....

227035.00

28020180717

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
	12		13a		13b		14		

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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Eldred, Roberta</b>		Date of Receipt 03 / 31 / 2008
Mailing Address 3000 Sand Hill Road, B1-145		Transaction ID: C-1700-03bz01
City Menlo Park	State CA	Zip Code 94025
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 2300.00	
Name of Employer Self-Employed	Occupation Homemaker	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 2300.00	

Full Name (Last, First, Middle Initial) <b>B. Hull, C. Kate Lambrew</b>		Date of Receipt 03 / 31 / 2008
Mailing Address 409 Jackson Place		Transaction ID: C-2618-03Gj02
City Alexandria	State VA	Zip Code 22302
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 700.00	
Name of Employer Fierce, Isakowitz & Blalock	Occupation Dir. Government Affairs	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 2200.00	

Full Name (Last, First, Middle Initial) <b>C. Hunton &amp; Williams</b>		Date of Receipt 03 / 31 / 2008
Mailing Address 1900 K. Street N. W.		Transaction ID: C-2641-03H104
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1) <i>* Attached Sheet contains contributors</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional) .....	4000.00
TOTAL This Period (last page this line number only) .....	231035.00

28020180718

Horton + Williams contributors  
each giving \$2.63

Ackerly, Benjamin C.  
Acosta-Lewis, Robert  
Adams, Lawrence C.  
Adams, Richard L.  
Albers, Michael  
Albrecht, Virginia S.  
Aicott, Kenneth J.  
Alexander, Joseph B., Jr  
Alonso, Fernando C.  
Anderson, Thomas E.  
Andrews, Walter J.  
Arbery, W. Christopher  
Ashton, Charles E. G.  
Austin, L. Scott  
Band, Ian P.  
Barnes, Haywood A.  
Bascomb, Rudene Mercer  
Battles, Philip M., III  
Beard, Sean M.  
Beardsworth, John J., Jr  
Becker, Steven H.  
Bell, Kenneth D.  
Bennett, Stephen John  
Bergkamp, Lucas  
Berman, Douglas  
Bierbower, Mark B.  
Biggs, Jo Ann  
Blacklocks, Stephen R.  
Blair, Jeff  
Blayney, Michael J.  
Bowen, James W.  
Bradshaw, Sheldon T.  
Brandley, David F., Jr  
Breckinridge, Zonnie  
Bromby, Craig A.  
Brown, A. Todd  
Brown, Tyler P.  
Brownell, F. William  
Brudenall, Peter  
Buckley, Kevin J.  
Bulleit, Kristy A. N.  
Buonanno, Joseph B.  
Burgard, Nadia  
Burner, Eric R.  
Buroker, Brian M.  
Calice, Ferdinand  
Calvert, Matthew J.  
Campbell, Daniel M.  
Cantrill, Tom  
Carlson, Grady K.  
Carter, Jean Gordon  
Case, Charles D.

Cawley, Thomas J.  
Chek, Lawrence  
Christman, James N.  
Clement, Whittington W.  
Clinard, R. Noel  
Cogels, Herve  
Collins, Cassandra C.  
Colvin, Stacy M.  
Congleton, Joseph P.  
Connor, Terence G.  
Cope, S. Gregory  
Cosby, Cameron N.  
Cottingham, T. Thomas, III  
Craig, Ted C.  
Crump, Cyane B.  
Cuillerier, Ian  
Cummings, Ashley  
Cunningham, Alexandra B.  
Cunningham, Sean B.  
Dannelly, William D.  
Danon, Samuel A.  
Davidson, Barry R.  
Deacon, John  
Decker, John A.  
Delionado, John  
Demm, Stephen P.  
Dorsey, Dee Ann  
Douma, Edward L.  
Dray, Mark S.  
Ducharme, Sean P.  
Duffie, L. Traywick  
Duncan, Deidre G.  
Dunlap, George, Jr  
Dyer, Roger  
Eames, Frederick R.  
Edwards, Joseph C.  
Edwards, Robert H., Jr  
Edwards, W. Jeffery  
Eichman, John  
Ellerman, Whitney  
Ellis, L. Neal, Jr  
Elmore, Edward W., Jr  
Elphicke, Charles  
Enjamio, Juan C.  
Epps, Patricia K.  
Faglioni, Kelly L.  
Failla, Susan S.  
Feiler, Eric H.  
Fenimore, Chet A.  
Fennessy, Mark J.  
Fichthorn, Norman W.  
Field, Andrea Bear

Fillmore, Robert M.  
Finto, Kevin J.  
Flynn, William M.  
Freeman, Lauren E.  
Freilicher, Ira L.  
Fricke, David R.  
Fuhr, Edward J.  
Gall, Charles A.  
Garner, Daniel C.  
Gary, Richard D.  
Gasch, Manning, Jr  
Gerber, Andrew A.  
Ghuri, Shahid  
Giese, Jeffrey  
Giragosian, C. Christopher  
Goettel, Timothy S.  
Golden, Peter G.  
Goolsby, Allen C.  
Grable, Raul  
Grames, Conan P.  
Granger, Douglas S.  
Gray, J. William, Jr  
Greef, Charles  
Grey, Robert J., Jr  
Griffith, Greta T.  
Grout, Bradley W.  
Gutchess, Jeffrey W.  
Haberer, Miles B.  
Hackney, Virginia H.  
Hahn, Robert J.  
Haley, John F.  
Hanson, Eric J.  
Hanson, Ronald M.  
Harden, Richard L.  
Harrison, Lowell  
Hartwell, Ray V., III  
Harvey, James A.  
Hawkins, Robert W.  
Hayes, Timothy G.  
Hedberg, Mark S.  
Heffner, Douglas J.  
Held, Michael  
Henry, Matthew C.  
Hershman, Scott  
Hesse, Gregory G.  
Hettrick, George H.  
Heuhsen, Louanna O.  
Higbee, David A.  
Hiner, Thomas Y.  
Hoffman, D. Bruce  
Hogfoss, Robert E.  
Holloway, John E.

Holloway, John M., III  
Holzgraefe, John  
Horner, Cecelia Philipps  
Howell, George C., III  
Hughes, Thomas M.  
Hull, Kevin F.  
Irwin, Donald P.  
Itkin, Judith H.  
Jarvis, Lori Elliott  
Jenkins, Matthew D.  
Jillson, Andrew E.  
Johnson, Harry M., III  
Jones, James A., III  
Jones, Kevin W.  
Jones, Laura Ellen  
Jordanger, Dan J.  
Julin, Thomas R.  
Kailer, Alan  
Kane, E. Peter  
Kaufman, Thomas F.  
Kay, Geoffrey S.  
Kearfótt, Joseph C.  
Keeley, Michael G.  
Kenyon, Douglas W.  
Kerrigan, Michael C.  
Ketchum, Ryan T.  
King, Robert A.  
Klotz, Robert  
Kochler, Sylvia King  
Koehler, Edward B.  
Konther, John T.  
Kulp, Christopher G.  
Kuner, Christopher  
Landin, David Craig  
Lashway, David C.  
Lawrence, Andrew W.  
Lay, Wood W.  
LeBey, Daniel M.  
Lennie, Bradley T.  
Leshin, L. Steven  
Lillard, Thomas F.  
Little, Catherine D.  
Little, Gregory G.  
Lockwood, Robert H.  
Lonergan, David C.  
Long, Nash E., III  
Louison, Audrey C.  
Loumiet, Carlos E.  
Lowman, David S., Jr  
Mack, Timothy A.  
Maddy, Tyler  
Maisog, Manuel E.

Marcuis, Alan J.  
Marek, Brian  
Margarit, Fernando  
Marino, Michael F., III  
Maris, Stephen S.  
Martin, Jeffrey N.  
Martin, John S.  
Martinez, Walfrido J.  
Massad, Michael P., Jr  
Matheson, Scott H.  
Mathews, Joseph Clarke  
Mathews, Laurie Uustal  
McBride, William H.  
McCann, Michael C.  
McConnell, Thomas A.  
McCormick, Patrick J., III  
McCormick, Robert  
McDermott, Francis A.  
McGeoch, Alexander G.  
McGranahan, John C., Jr  
McIndoe, David T.  
Meadows, James E.  
Menezes, Mark W.  
Messplay, Gary C.  
Miller, James Forrest  
Mitchell, Patrick  
Moeller, John E., Jr  
Molenkamp, Jack A.  
Monroe, Charles R., Jr  
Montgomery, Will  
Moore, T. Justin, III  
Moore, Thurston R.  
Moorhead, Bruce W., Jr  
Mortimer, Ann Marie  
Murdock, Eric J.  
Murphy, Ted J.  
Murphy, Thomas P.  
Mustone, David Albert  
Naughton, James P.  
Nedzbala, Michael  
Nickel, Henry V.  
Nunley, Lonnie D., III  
Nye, E. Allen, Jr  
O'Neill, John D., Jr  
O'Quinn, Pam Gates  
Okinaka, Leslie A.  
Otero, Brian V.  
Parks, Randall S.  
Partee, Peter S., Sr  
Pate, R. Hewitt  
Patterson, William S.  
Peña, H. R. Bert

Phelps, Michael P.F.  
Pope, Robert Dean  
Powell, Kurt A.  
Powell, Lewis F., III  
Powell, Wesley R.  
Praiss, Donna M.  
Pulley, J. Waverly, III  
Quackenboss, Robert T.  
Quigley, Dearbhla  
Rainey, Dionne C.  
Rainey, Gordon F., Jr  
Ramsey, Katherine  
Range, John Jay  
Raphael, Stuart A.  
Rasile, Craig V.  
Ratino, John M.  
Rausch, Robert S.  
Ravelo, Keila D.  
Reck, Belynda B.  
Rector, Baker R.  
Regan, Shawn Patrick  
Rewari, Sona  
Rice, Thomas A.  
Richardson, William M.  
Rist, Michael  
Ritter, J. G., II  
Robb, Kathy  
Robertson, Daryl  
Robertson, Gregory B.  
Rolfe, Robert M.  
Rosener, Ronald  
Rosenthal, Michael  
Rowe, William L. S.  
Ruby, Marguerite (Rita) R.  
Rudlin, D. Alan  
Rusher, Mary Nash K.  
Ryan, Timothy R.  
Sampson, Kyle  
Sanzaro, Karen M.  
Sayers, Stephen M.  
Schmitt, Gregory  
Schneider, John R.  
Schreiber, Howard E.  
Schulman, Robert M.  
Schwer, Jeremy R.  
Seaman, P. Watson  
Seever, James S., Jr  
Selby, Douglass P.  
Sharp, Joel  
Shebelskie, Michael R.  
Silva, Michael A.  
Silverman, William

Sim, Edmund W.  
Sirgado, Jo Anne E.  
Sladek, William L.  
Slater, Thomas G., Jr  
Smelcer, B. Darrell  
Smith, Brooks M.  
Smith, Caryl Greenberg  
Smith, J. R.  
Solow, Steven P.  
Song, Yisun  
Sotto, Lisa J.  
Stanko, Joseph C., Jr  
Steinberg, Marty  
Stenger, John  
Stevens, Catherine B.  
Stillman, Gregory N.  
Sullivan, C. Randolph  
Sumawong, Chanmanu  
Sweeney, R. Michael, Jr  
Talavera, Henry  
Tapscott, Andrew J.  
Tata, Robert M.  
Tate, Rodger L.  
Taylor, W. Lake, Jr  
Taylor, Wendell L.  
Teskin, Robin L.  
Tetlow, Paul  
Thomas, John Charles  
Thomas, Martin  
Thompson, Gary E.  
Tolley, B. Cary, III  
Totten, Randolph F.  
Treacy, Bridget C.  
Trimble, Thomas B.  
Tull, Melvin E., III  
Ungerman, Julie I.  
Vajasit, Surasak  
Van Deusen, Mark C.  
Vaughan, C. Porter, III  
Veron, Enid L.  
Voelker, Stephen  
Vowell, Mark  
Walsh, Linda L.  
Walsh, William A., Jr  
Warman, Lynnette R.  
Watts-FitzGerald, Abigail  
Wehrum, William L.  
Weinstock, Peter  
Weisblat, David B.  
Weisshaar, Mark G.  
Wellford, Hill B., Jr  
Wells, David E.

West, G. Thomas, Jr  
Whitson, Jerry E.  
Wickes, Paul O.  
Wilan, Jonathan M.  
Wiles, David R.  
Williams, Amy McDaniel  
Williams, Gerry L.  
Williams, Matthew J.  
Wilson, Michael G.  
Wise, Robert K.  
Woods, John W., Jr  
Wright, David C.  
Yarnell, Scott F.  
Young, William F.  
Zaron, Andrew  
Zeugin, Lee B.

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Janetschek, Jr., William J.</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2008</b>
Mailing Address <b>9 West 57 Street, Suite 4200</b>		Transaction ID: <b>C-2750-03fr01</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10019</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>2000.00</b>	
Name of Employer <b>Kohlberg Kravis Roberts &amp; Co.</b>	Occupation <b>CFO</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>2000.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Kaminsky, Lawrence</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2008</b>
Mailing Address <b>10235 S. Greentree Ct</b>		Transaction ID: <b>C-2859-02o805</b>
City <b>Olathe</b>	State <b>KS</b>	Zip Code <b>66061</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>250.00</b>	
Name of Employer <b>Thomas McGee, L.C.</b>	Occupation <b>Insurance</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>1100.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Leach, Howard</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2008</b>
Mailing Address <b>101 California Street, Suite 4310</b>		Transaction ID: <b>C-3179-03mQ01</b>
City <b>San Francisco</b>	State <b>CA</b>	Zip Code <b>94111</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>Self-Employed</b>	Occupation <b>Private Investor</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>1000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>3250.00</b>
TOTAL This Period (last page this line number only) .....	<b>234285.00</b>

28020180722

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Lipschultz, Jennifer S.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 9 West 57th Street, Suite 4200  
 City: New York State: NY Zip Code: 10019  
 Date of Receipt: 03 / 31 / 2008  
 Transaction ID: C-3260-03fu01  
 Amount of Each Receipt this Period: 2000.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Self-Employed Occupation: Homemaker  
 Receipt For:  Primary  General  
 Other (specify):  
 Election Cycle-to-Date: 2000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Lipschultz, Marc S.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 9 West 57th Street, Suite 4200  
 City: New York State: NY Zip Code: 10019  
 Date of Receipt: 03 / 31 / 2008  
 Transaction ID: C-3261-03ft01  
 Amount of Each Receipt this Period: 2000.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Kohlberg Kravis Roberts & Co. Occupation: Member  
 Receipt For:  Primary  General  
 Other (specify):  
 Election Cycle-to-Date: 2000.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Ozenberger, Laura L.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 5704 N Woodland Pt.  
 City: Parkville State: MO Zip Code: 64152  
 Date of Receipt: 03 / 31 / 2008  
 Transaction ID: C-4084-03c201  
 Amount of Each Receipt this Period: 400.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Inergy Occupation: VP and General Counsel  
 Receipt For:  Primary  General  
 Other (specify):  
 Election Cycle-to-Date: 400.00  
 Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 4400.00  
 TOTAL This Period (last page this line number only) ..... 238685.00

28020180723

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Petersen, John D.</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2008</b>
Mailing Address <b>6201 College Blvd #500</b>		Transaction ID: <b>C-4179-01Be09</b>
City <b>Overland Park</b>	State <b>KS</b>	Zip Code <b>66211</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>Polsinelli, White</b>	Occupation <b>Attorney</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>2250.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Schwalm, Irvin</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2008</b>
Mailing Address <b>P. O. Box 315, 511 Pawnee Street</b>		Transaction ID: <b>C-4786-01Ju06</b>
City <b>Hiawatha</b>	State <b>KS</b>	Zip Code <b>66434</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100.00</b>
Name of Employer <b>None</b>	Occupation <b>Retired</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>300.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Sherman, John J.</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2008</b>
Mailing Address <b>1017 W 57th Ter</b>		Transaction ID: <b>C-4903-03c301</b>
City <b>Kansas City</b>	State <b>MO</b>	Zip Code <b>64113</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2300.00</b>
Name of Employer <b>Inergy</b>	Occupation <b>President and CEO</b>	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>4600.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>3400.00</b>
TOTAL This Period (last page this line number only) .....	<b>242085.00</b>

20020180724

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
	12		13a		13b		14		

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Sherman, John J.</b>		Date of Receipt 03 / 31 / 2008
Mailing Address 1017 W 57th Ter		Transaction ID: C-4904-03c302
City Kansas City	State MO	Zip Code 64113
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2300.00
Name of Employer Inergy	Occupation President and CEO	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 4600.00	

Full Name (Last, First, Middle Initial) <b>B. Sorkin, David J.</b>		Date of Receipt 03 / 31 / 2008
Mailing Address 9 West 57 Street, Suite 4200		Transaction ID: C-5048-03fs01
City New York	State NY	Zip Code 10019
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer Kohlberg Kravis Roberts & Co.	Occupation Member	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Whyte, Roger</b>		Date of Receipt 03 / 31 / 2008
Mailing Address 4921 Portwest Cir		Transaction ID: C-5787-03Fm02
City Wichita	State KS	Zip Code 67204
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Cessna	Occupation Executive	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date 1500.00	

SUBTOTAL of Receipts This Page (optional) .....	4800.00
TOTAL This Period (last page this line number only) .....	246885.00

280201807215

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) . . . . . PAT ROBERTS FOR SENATE  
C00128876

Full Name (Last, First, Middle Initial)

**A. Republican Majority Fund**

Mailing Address

A. Multicandidate Committee, 1155 21st Street NW, Suite 300

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing federal political committee.   C

Name of Employer	Occupation

Receipt For:  
 Primary     General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
  7500.00

Date of Receipt

Mo	Da	Yr
03	31	2008

Transaction ID: C-4433-01Rm06

Amount of Each Receipt this Period

2500.00
---------

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

2500.00
---------

TOTAL This Period (last page this line number only) .....

2500.00
---------

28020180726

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 40

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. International Council of</b>		Date of Receipt MM / DD / YYYY <b>01 / 07 / 2008</b>
Mailing Address <b>Shopping Centers, Inc. PAC, 1399 New York Ave. NW</b>		Transaction ID: <b>C-2672-03XR01</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20005</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>2000.00</b>	
Name of Employer	Occupation	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>2000.00</b>	

Full Name (Last, First, Middle Initial) <b>B. The Roche Good Government Committee</b>		Date of Receipt MM / DD / YYYY <b>01 / 15 / 2008</b>
Mailing Address <b>340 Kingsland Street</b>		Transaction ID: <b>C-5335-03XV01</b>
City <b>Nutley</b>	State <b>NJ</b>	Zip Code <b>07110</b>
FEC ID number of contributing federal political committee. <b>C 00072769</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer	Occupation	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>C. CHS Inc. - PAC</b>		Date of Receipt MM / DD / YYYY <b>01 / 23 / 2008</b>
Mailing Address <b>P. O. Box 64089</b>		Transaction ID: <b>C-1110-034y02</b>
City <b>Saint Paul</b>	State <b>MN</b>	Zip Code <b>55164</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>500.00</b>	
Name of Employer	Occupation	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>1500.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>3500.00</b>
TOTAL This Period (last page this line number only) .....	<b>3500.00</b>

28020180727

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2 OF 40

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)

**A. Florida Power & Light PAC**

Mailing Address  
(FPLPAC), 700 Universe Blvd.

City State Zip Code  
Juno Beach FL 33408

FEC ID number of contributing federal political committee. **C 00064774**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt

**01 / 23 / 2008**

Transaction ID: C-1913-02Py02

Amount of Each Receipt this Period

**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. Northern Lights PAC Inc.**

Mailing Address  
P. O. Box 2566

City State Zip Code  
Washington DC 20013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
**10000.00**

Date of Receipt

**02 / 05 / 2008**

Transaction ID: C-3970-02PY07

Amount of Each Receipt this Period

**5000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Nssga Rock PAC**

Mailing Address  
1605 King Street

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C 00089458**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
**3000.00**

Date of Receipt

**02 / 05 / 2008**

Transaction ID: C-3989-02qr03

Amount of Each Receipt this Period

**2000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....▶

**8000.00**

TOTAL This Period (last page this line number only) .....▶

**11500.00**

28020180728



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 4 OF 40

11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Florida Congressional Committee (FCC)**

Full Name (Last, First, Middle Initial)  
Mailing Address  
Political Action Committee, 9999 NE 2nd Ave  
City State Zip Code  
Miami Shores FL 33138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date  
5000.00

Date of Receipt  
MM / DD / YYYY  
02 / 06 / 2008

Transaction ID: C-1912-03YY01

Amount of Each Receipt this Period  
5000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Frontier P. A. C.**

Full Name (Last, First, Middle Initial)  
Mailing Address  
10000 Memorial Dr., Suite 600  
City State Zip Code  
Houston TX 77024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date  
4500.00

Date of Receipt  
MM / DD / YYYY  
02 / 06 / 2008

Transaction ID: C-2022-02su05

Amount of Each Receipt this Period  
1500.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Greenberg Taurig, P.A. PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address  
1221 Brickell Avenue  
City State Zip Code  
Miami FL 33131

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date  
2500.00

Date of Receipt  
MM / DD / YYYY  
02 / 06 / 2008

Transaction ID: C-2219-03YW01

Amount of Each Receipt this Period  
2500.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 9000.00

TOTAL This Period (last page this line number only) ..... 29500.00

28020180730

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Outback Steakhouse Inc. PAC</b>		Date of Receipt MM / DD / YYYY <b>02 / 06 / 2008</b>
Mailing Address <b>2202 N. Westshore Blvd Fl 5</b>		Transaction ID: <b>C-4051-023Z03</b>
City <b>Tampa</b>	State <b>FL</b>	Zip Code <b>33607</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>3000.00</b>
Name of Employer	Occupation	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>3000.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Sun Political Action Committee</b>		Date of Receipt MM / DD / YYYY <b>02 / 06 / 2008</b>
Mailing Address <b>999 Ponce de Leon Boulevard, Suite 625</b>		Transaction ID: <b>C-5202-03YV01</b>
City <b>Coral Gables</b>	State <b>FL</b>	Zip Code <b>33134</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>5000.00</b>
Name of Employer	Occupation	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>5000.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Chevron Employees PAC</b>		Date of Receipt MM / DD / YYYY <b>02 / 12 / 2008</b>
Mailing Address <b>P. O. Box 6016</b>		Transaction ID: <b>C-1099-03Ng02</b>
City <b>San Ramon</b>	State <b>CA</b>	Zip Code <b>94583</b>
FEC ID number of contributing federal political committee. <b>C 00035006</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer	Occupation	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>2000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>9000.00</b>
TOTAL This Period (last page this line number only) .....	<b>38500.00</b>

28020180731

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 40

11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. New York Life P. A. C.**

Mailing Address  
51 Madison Ave., Room 1109

City State Zip Code  
New York NY 10010

FEC ID number of contributing federal political committee. **C 00158881**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
**4500.00**

Date of Receipt  
**02 / 12 / 2008**

Transaction ID: C-3922-038204

Amount of Each Receipt this Period  
**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. Aflac Incorporated**

Mailing Address  
Political Action Committee, 1932 Wynnton Road

City State Zip Code  
Columbus GA 31999

FEC ID number of contributing federal political committee. **C 00034157**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
**6000.00**

Date of Receipt  
**02 / 14 / 2008**

Transaction ID: C-58-037202

Amount of Each Receipt this Period  
**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. General Electric Company PAC (GEPAC)**

Mailing Address  
1299 Pennsylvania Ave NW, Suite 1100

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C 00024869**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
**10000.00**

Date of Receipt  
**02 / 14 / 2008**

Transaction ID: C-2090-01LK0J

Amount of Each Receipt this Period  
**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

**3000.00**

TOTAL This Period (last page this line number only) .....

**41500.00**

28020180732

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)		Date of Receipt	
<b>A. NCPA PAC</b>		M/M / D/D / YYY-YY-YY 02 / 14 / 2008	
Mailing Address		Transaction ID: C-3882-035Y03	
National Community Pharmacists Ass, Political Action Committee		Amount of Each Receipt this Period	
City	State	Zip Code	1000.00
Alexandria	VA	22314	
FEC ID number of contributing federal political committee.		<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)	
C			
Name of Employer	Occupation		
Receipt For:		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		5000.00	
<input type="checkbox"/> Other (specify): ▼			

Full Name (Last, First, Middle Initial)		Date of Receipt	
<b>B. Qwest PAC</b>		M/M / D/D / YYY-YY-YY 02 / 14 / 2008	
Mailing Address		Transaction ID: C-4315-031904	
607 14th Street N. W., Suite 950		Amount of Each Receipt this Period	
City	State	Zip Code	1000.00
Washington	DC	20005	
FEC ID number of contributing federal political committee.		<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)	
C 00237156			
Name of Employer	Occupation		
Receipt For:		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		6500.00	
<input type="checkbox"/> Other (specify): ▼			

Full Name (Last, First, Middle Initial)		Date of Receipt	
<b>C. SunPAC</b>		M/M / D/D / YYY-YY-YY 02 / 14 / 2008	
Mailing Address		Transaction ID: C-5206-021M08	
1735 Market Street		Amount of Each Receipt this Period	
City	State	Zip Code	1000.00
Philadelphia	PA	19103	
FEC ID number of contributing federal political committee.		<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)	
C			
Name of Employer	Occupation		
Receipt For:		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		6000.00	
<input type="checkbox"/> Other (specify): ▼			

SUBTOTAL of Receipts This Page (optional) .....	3000.00
TOTAL This Period (last page this line number only) .....	44500.00

28020180733

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. Apollo Group, Inc.**

Mailing Address  
**National Political Organization, for Legislative Leadership**

City State Zip Code  
**Phoenix AZ 85040**

FEC ID number of contributing federal political committee. **C 00309781**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
**1000.00**

Date of Receipt  
**02 / 19 / 2008**

Transaction ID: **C-195-03ZB01**

Amount of Each Receipt this Period  
**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. Blue Cross & Blue Shield of Kansas**

Mailing Address  
**Employee PAC, 1133 SW Topeka Blvd.**

City State Zip Code  
**Topeka KS 66629**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
**2000.00**

Date of Receipt  
**02 / 19 / 2008**

Transaction ID: **C-729-03ZA01**

Amount of Each Receipt this Period  
**2000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. American Medical Association PAC (AMPAC)**

Mailing Address  
**25 Massachusetts Ave. NW, Suite 60**

City State Zip Code  
**Washington DC 20001**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
**5000.00**

Date of Receipt  
**02 / 26 / 2008**

Transaction ID: **C-150-03ZU01**

Amount of Each Receipt this Period  
**5000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) .....

**8000.00**

**52500.00**

28020180739

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. American Bakers Association PAC**

Mailing Address  
1300 I Street, NW, Suite 700 West

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date  
1000.00

Date of Receipt  
02 / 27 / 2008

Transaction ID: C-121-03Zi01

Amount of Each Receipt this Period  
1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. MinePAC**

Mailing Address  
A. Pac Of The National Mining Asso, 101 Constitution Avenue NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** 00304634

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date  
1000.00

Date of Receipt  
02 / 27 / 2008

Transaction ID: C-3660-02fz02

Amount of Each Receipt this Period  
1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. Campbell For Colorado**

Mailing Address  
3234 W Girard Ave., Unit A

City State Zip Code  
Englewood CO 80110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date  
2000.00

Date of Receipt  
03 / 03 / 2008

Transaction ID: C-1007-03Zj01

Amount of Each Receipt this Period  
2000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....	4000.00
TOTAL This Period (last page this line number only) .....	56500.00

28020180733

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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11a  
12  11b  
13a  11c  
13b  11d  
14  15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Prudential Financial Inc. PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address  
751 Broad Street  
City Newark State NJ Zip Code 07102

FEC ID number of contributing federal political committee. **C 00127779**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **1500.00**

Date of Receipt  
M/M / D/D / YYY-YY-YY  
**03 / 03 / 2008**

Transaction ID: C-4296-03Zk01

Amount of Each Receipt this Period  
**1500.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. USA Rice Federation PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address  
4301 North Fairfax Drive, Suite 425  
City Arlington State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C 00308478**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **3000.00**

Date of Receipt  
M/M / D/D / YYY-YY-YY  
**03 / 05 / 2008**

Transaction ID: C-5491-02Mw05

Amount of Each Receipt this Period  
**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. ADM PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address  
P. O. Box 1470  
City Decatur State IL Zip Code 62525

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **4500.00**

Date of Receipt  
M/M / D/D / YYY-YY-YY  
**03 / 06 / 2008**

Transaction ID: C-47-00050D

Amount of Each Receipt this Period  
**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....▶

TOTAL This Period (last page this line number only) .....▶

**3500.00**

**60000.00**

28020180738



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address  
Political Action Committee, 942 S. Shady Grove Rd.

City State Zip Code  
Memphis TN 38120

FEC ID number of contributing federal political committee. **C 00068692**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
**10000.00**

Date of Receipt  
**03 / 06 / 2008**

Transaction ID: C-1844-01A409

Amount of Each Receipt this Period  
**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. Honeywell International PAC**

Mailing Address  
101 Constitution Ave. NW, Ste 500 W.

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C 00096156**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
**5000.00**

Date of Receipt  
**03 / 06 / 2008**

Transaction ID: C-2544-03QY02

Amount of Each Receipt this Period  
**2000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. John Deere PAC**

Mailing Address  
One John Deere Place

City State Zip Code  
Moline IL 61265

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
**6000.00**

Date of Receipt  
**03 / 06 / 2008**

Transaction ID: C-2755-02Q209

Amount of Each Receipt this Period  
**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....▶

TOTAL This Period (last page this line number only) .....▶

**4000.00**

**67000.00**

28020180733

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 40

11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)

**A. MeadWestvaco PAC**

Mailing Address  
11013 West Broad Street

City State Zip Code  
Glen Allen VA 23060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify):   
Election Cycle-to-Date **1000.00**

Date of Receipt

**03 / 06 / 2008**

Transaction ID: C-3533-03Zq01

Amount of Each Receipt this Period

**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. Realtors Pac (RPAC)**

Mailing Address  
430 N. Michigan Ave.

City State Zip Code  
Chicago IL 60611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify):   
Election Cycle-to-Date **3000.00**

Date of Receipt

**03 / 06 / 2008**

Transaction ID: C-4370-002a0D

Amount of Each Receipt this Period

**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. U. S. Bancorp Political Participation**

Mailing Address  
Program Federal Pac, 800 Nicollet Mall

City State Zip Code  
Minneapolis MN 55402

FEC ID number of contributing federal political committee. **C 00018036**

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify):   
Election Cycle-to-Date **6000.00**

Date of Receipt

**03 / 06 / 2008**

Transaction ID: C-5451-032w02

Amount of Each Receipt this Period

**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

**3000.00**

TOTAL This Period (last page this line number only) .....

**70000.00**

28020180739

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 40

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. U. S. Bancorp Political Participation**

Full Name (Last, First, Middle Initial)  
Mailing Address  
Program Federal Pac, 800 Nicollet Mall  
City State Zip Code  
Minneapolis MN 55402

FEC ID number of contributing federal political committee. **C** 00018036

Name of Employer Occupation

Receipt For:  
 Primary  General  
Other (specify):

Election Cycle-to-Date  
6000.00

Date of Receipt  
03 / 06 / 2008  
Transaction ID: C-5452-032w03

Amount of Each Receipt this Period  
4000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Agsh&F Civic Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address  
Akin Gump Strauss Hauer & Feld L., 1333 New Hampshire Avenue NW, Ste  
City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
Other (specify):

Election Cycle-to-Date  
2750.00

Date of Receipt  
03 / 10 / 2008  
Transaction ID: C-73-01D206

Amount of Each Receipt this Period  
1500.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. CLMA PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address  
989 Old Eagle School Rd., #815  
City State Zip Code  
Wayne PA 19087

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
Other (specify):

Election Cycle-to-Date  
2000.00

Date of Receipt  
03 / 10 / 2008  
Transaction ID: C-970-03Zy01

Amount of Each Receipt this Period  
2000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 7500.00

TOTAL This Period (last page this line number only) ..... 77500.00

28020180740

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 40

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Committee for Advancement of Cotton</b>		Date of Receipt MM / DD / YYYY <b>03 / 10 / 2008</b>
Mailing Address <b>P. O. Box 820292</b>		Transaction ID: <b>C-1219-000n0E</b>
City <b>Memphis</b>	State <b>TN</b>	Zip Code <b>38182</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer	Occupation	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date <b>6012.42</b>	

Full Name (Last, First, Middle Initial) <b>B. Day &amp; Zimmermann Inc PAC</b>		Date of Receipt MM / DD / YYYY <b>03 / 10 / 2008</b>
Mailing Address <b>1818 Market St. 22nd Fl</b>		Transaction ID: <b>C-1456-02pn02</b>
City <b>Philadelphia</b>	State <b>PA</b>	Zip Code <b>19103</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer	Occupation	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>C. LMA PAC</b>		Date of Receipt MM / DD / YYYY <b>03 / 10 / 2008</b>
Mailing Address <b>10510 NW Ambassador Drive</b>		Transaction ID: <b>C-3254-03Np02</b>
City <b>Kansas City</b>	State <b>MO</b>	Zip Code <b>64153</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000.00</b>
Name of Employer	Occupation	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Election Cycle-to-Date <b>3000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>4000.00</b>
TOTAL This Period (last page this line number only) .....	<b>81500.00</b>

28020180741

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 OF 40

11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full)

PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

**A. National Chicken Council**

Mailing Address

Political Action Committee, 1015 15th Street N. W.

City

State

Zip Code

Washington

DC

20005

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify):

Election Cycle-to-Date

3000.00

Date of Receipt

MM / DD / YYYY  
03 / 10 / 2008

Transaction ID: C-3858-02Nd04

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. PMA Group PAC**

Mailing Address

The PMA Group Inc., 2345 Crystal Dr.

City

State

Zip Code

Arlington

VA

22202

FEC ID number of contributing federal political committee.

C 00280321

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify):

Election Cycle-to-Date

2000.00

Date of Receipt

MM / DD / YYYY  
03 / 10 / 2008

Transaction ID: C-4225-033U02

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Seaboard Corporation P. A. C.**

Mailing Address

9000 W 67th Street, (omit at donor request)

City

State

Zip Code

Shawnee Mission

KS

66202

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify):

Election Cycle-to-Date

6000.00

Date of Receipt

MM / DD / YYYY  
03 / 10 / 2008

Transaction ID: C-4800-010i0A

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

84500.00

280201807A2

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 40

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Aflac Incorporated**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
Political Action Committee, 1932 Wynnton Road

City State Zip Code  
Columbus GA 31999

FEC ID number of contributing federal political committee. **C 00034157**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **6000.00**

Date of Receipt **03 / 12 / 2008**

Transaction ID: C-59-037203

Amount of Each Receipt this Period **4000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Comcast Corporation P. A. C.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
1500 Market Street

City State Zip Code  
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **3000.00**

Date of Receipt **03 / 12 / 2008**

Transaction ID: C-1212-02j03

Amount of Each Receipt this Period **1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Metlife, Inc.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
Employees Political Participation, One Metlife Plaza

City State Zip Code  
Long Island City NY 11101

FEC ID number of contributing federal political committee. **C 00040923**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ **1000.00**

Date of Receipt **03 / 13 / 2008**

Transaction ID: C-3587-02YP03

Amount of Each Receipt this Period **1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... **6000.00**

TOTAL This Period (last page this line number only) ..... **90500.00**

28020180743

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 OF 40

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. VHA Political Action Committee**

Mailing Address  
220 E Las Colinas Blvd.

City State Zip Code  
Irving TX 75039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
03 / 13 / 2008

Transaction ID: C-5498-03aC01

Amount of Each Receipt this Period  
1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. AGL Resources Inc PAC**

Mailing Address  
P.O. Box 4569

City State Zip Code  
Atlanta GA 30302

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
03 / 18 / 2008

Transaction ID: C-14-03aJ01

Amount of Each Receipt this Period  
1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. AICPA PAC**

Mailing Address  
Palladian Corporate Center, 220 Leigh Farm Road

City State Zip Code  
Durham NC 27707

FEC ID number of contributing federal political committee. **C** 00077321

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
03 / 18 / 2008

Transaction ID: C-77-035003

Amount of Each Receipt this Period  
1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....▶

TOTAL This Period (last page this line number only) .....▶

3000.00

93500.00

280201807AA

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 OF 40

11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)

**A. American Association of Bioanalysts**

Mailing Address

Political Action Committee, 906 Olive Street

City State Zip Code  
Saint Louis MO 63101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **2000.00**

Date of Receipt

**03 / 18 / 2008**

Transaction ID: C-120-03a101

Amount of Each Receipt this Period

**2000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. American Clinical Laboratory Association**

Mailing Address

(ACLA PAC), 1250 H. Street, NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **3000.00**

Date of Receipt

**03 / 18 / 2008**

Transaction ID: C-128-01NM03

Amount of Each Receipt this Period

**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. American Clinical Laboratory Association**

Mailing Address

(ACLA PAC), 1250 H. Street, NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **3000.00**

Date of Receipt

**03 / 18 / 2008**

Transaction ID: C-129-01NM04

Amount of Each Receipt this Period

**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

**4000.00**

TOTAL This Period (last page this line number only) .....

**97500.00**

28020180745

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. American Society Of Plastic Surgeons Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address

Pac

City State Zip Code  
Arlington Heights IL 60005

FEC ID number of contributing federal political committee. **C 00249342**

Name of Employer Occupation

Receipt For:  
 Primary  General  
Other (specify): ▼

Election Cycle-to-Date ▼  
**4500.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 18 / 2008**

Transaction ID: C-157-03Re02

Amount of Each Receipt this Period  
**2000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. At&T Inc.Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

Mailing Address  
175 E. Houston, Rm 7-A-50

City State Zip Code  
San Antonio TX 78205

FEC ID number of contributing federal political committee. **C 00109017**

Name of Employer Occupation

Receipt For:  
 Primary  General  
Other (specify): ▼

Election Cycle-to-Date ▼  
**6000.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 18 / 2008**

Transaction ID: C-249-000M0A

Amount of Each Receipt this Period  
**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Bunge North America Inc. P. A. C.**

Full Name (Last, First, Middle Initial)

Mailing Address  
750 First Street NE, Suite 1070

City State Zip Code  
Washington DC 20002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
Other (specify): ▼

Election Cycle-to-Date ▼  
**2000.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 18 / 2008**

Transaction ID: C-930-03NI02

Amount of Each Receipt this Period  
**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....	<b>4000.00</b>
TOTAL This Period (last page this line number only) .....	<b>101500.00</b>

28020180746

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full)

PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

**A. Crop Insurance Research Bureau PAC**

Mailing Address

10800 Farley, Suite 330

City

Overland Park

State

KS

Zip Code

66210

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify):

Election Cycle-to-Date

3500.00

Date of Receipt

03 / 18 / 2008

Transaction ID: C-1339-000v05

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. C. S. X. Good Government Fund**

Mailing Address

1331 Pennsylvania Avenue NW, Suite 560 National Place

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify):

Election Cycle-to-Date

3000.00

Date of Receipt

03 / 18 / 2008

Transaction ID: C-1363-01LQ04

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Honeywell International PAC**

Mailing Address

101 Constitution Ave. NW, Ste 500 W.

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing federal political committee.

C 00096156

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify):

Election Cycle-to-Date

5000.00

Date of Receipt

03 / 18 / 2008

Transaction ID: C-2545-03QY03

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

104500.00

28020180747

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)

**A. Laboratory Corporation of America Holdings**

Mailing Address

Political Participation Committee, P.O. Box 2230

City State Zip Code  
Burlington NC 27216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify):  
Election Cycle-to-Date **2000.00**

Date of Receipt

MM / DD / YYYY  
03 / 18 / 2008

Transaction ID: C-3090-03aH01

Amount of Each Receipt this Period

**2000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. National Grain & Feed Association**

Mailing Address

Fund for Better Government, Committee Grainpac

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify):  
Election Cycle-to-Date **1000.00**

Date of Receipt

MM / DD / YYYY  
03 / 18 / 2008

Transaction ID: C-3859-003S07

Amount of Each Receipt this Period

**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. QuestPAC**

Mailing Address

Quest Diagnostic Employees PAC, 815 Connecticut Ave., NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C 00329185**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify):  
Election Cycle-to-Date **1000.00**

Date of Receipt

MM / DD / YYYY  
03 / 18 / 2008

Transaction ID: C-4308-03aD01

Amount of Each Receipt this Period

**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) →

**4000.00**

TOTAL This Period (last page this line number only) →

**108500.00**

28020180748

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (in Full)

PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

**A. Safety-Kleen Holdco, Inc. PAC**

Mailing Address

5400 Legacy Dr., Cluster II Building 3

City

State

Zip Code

Plano

TX

75024

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

03 /  18 /  2008

Transaction ID: C-4630-03aE01

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. SunPAC**

Mailing Address

1735 Market Street

City

State

Zip Code

Philadelphia

PA

19103

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

03 /  18 /  2008

Transaction ID: C-5207-021M09

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. UPSPAC**

Mailing Address

United Parcel Service, Political Action Committee

City

State

Zip Code

Atlanta

GA

30328

FEC ID number of contributing federal political committee.

**C** 00064766

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

03 /  18 /  2008

Transaction ID: C-5486-003B0M

Amount of Each Receipt this Period

500.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

111000.00

28020180749

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Alex Lee, Inc. PAC</b>		Date of Receipt MM / DD / YYYY <b>03 / 21 / 2008</b>
Mailing Address <b>120 4th St. SW</b>		Transaction ID: <b>C-89-03ao01</b>
City <b>Hickory</b>	State <b>NC</b>	Zip Code <b>28602</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer	Occupation	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Freedom &amp; Democracy Fund</b>		Date of Receipt MM / DD / YYYY <b>03 / 21 / 2008</b>
Mailing Address <b>610 S. Boulevard</b>		Transaction ID: <b>C-1989-03an01</b>
City <b>Tampa</b>	State <b>FL</b>	Zip Code <b>33606</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>5000.00</b>
Name of Employer	Occupation	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>5000.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Lathrop &amp; Gage L. C.</b>		Date of Receipt MM / DD / YYYY <b>03 / 21 / 2008</b>
Mailing Address <b>2345 Grand Boulevard</b>		Transaction ID: <b>C-3141-02yT02</b>
City <b>Kansas City</b>	State <b>MO</b>	Zip Code <b>64108</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000.00</b>
Name of Employer	Occupation	<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>3000.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>8000.00</b>
TOTAL This Period (last page this line number only) .....	<b>119000.00</b>

28020180750

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Payless Shoesource Inc. P. A. C.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
3231 East 6TH Street

City State Zip Code  
Topeka KS 66607

FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
\_\_\_\_\_ 4500.00

Date of Receipt  
MM / DD / YYYY  
03 / 21 / 2008

Transaction ID: C-4126-02Bx05

Amount of Each Receipt this Period  
\_\_\_\_\_ 3000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Union Pacific Corp Fund For Effective Gove**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
600 Thirteenth Street NW, Suite 340

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
\_\_\_\_\_ 10000.00

Date of Receipt  
MM / DD / YYYY  
03 / 21 / 2008

Transaction ID: C-5467-00380K

Amount of Each Receipt this Period  
\_\_\_\_\_ 3000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. ACRA (RADPAC)**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
American College of Radiology Asso, 1701 Pennsylvania Ave. N.W.

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
\_\_\_\_\_ 3000.00

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2008

Transaction ID: C-11-03XG02

Amount of Each Receipt this Period  
\_\_\_\_\_ 2000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....▶ \_\_\_\_\_ 8000.00

TOTAL This Period (last page this line number only) .....▶ \_\_\_\_\_ 127000.00

20020180741



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (in Full)

PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

**A. Boston Scientific Corp PAC**

Mailing Address

One Boston Scientific Pl

City

Natick

State

MA

Zip Code

01760

FEC ID number of contributing federal political committee.

**C** [ ]

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

[ ] 3000.00

Date of Receipt

MM / DD / YYYY  
03 / 26 / 2008

Transaction ID: C-798-03G502

Amount of Each Receipt this Period

[ ] 2000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. Burns & McDonnell, Inc. PAC**

Mailing Address

9400 Ward Parkway

City

Kansas City

State

MO

Zip Code

64114

FEC ID number of contributing federal political committee.

**C** 00442913

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

[ ] 2300.00

Date of Receipt

MM / DD / YYYY  
03 / 26 / 2008

Transaction ID: C-947-03b601

Amount of Each Receipt this Period

[ ] 2300.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Commerce Bancshares Inc. PAC**

Mailing Address

P. O. Box 13686

City

Kansas City

State

MO

Zip Code

64199

FEC ID number of contributing federal political committee.

**C** [ ]

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

[ ] 4500.00

Date of Receipt

MM / DD / YYYY  
03 / 26 / 2008

Transaction ID: C-1215-01BX08

Amount of Each Receipt this Period

[ ] 2500.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

[ ] 6800.00

TOTAL This Period (last page this line number only) .....

[ ] 147300.00

38020180753

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)

**A. Coventry Health Care Inc.**

Mailing Address  
First Health Group Corp Pac, 901 New York Ave. NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date  
3000.00

Date of Receipt  
03 / 26 / 2008

Transaction ID: C-1299-03QZ03

Amount of Each Receipt this Period  
1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. General Electric Company PAC (GEPAC)**

Mailing Address  
1299 Pennsylvania Ave NW, Suite 1100

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** 00024869

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date  
10000.00

Date of Receipt  
03 / 26 / 2008

Transaction ID: C-2091-01LK0K

Amount of Each Receipt this Period  
1500.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Norfolk Southern Corporation**

Mailing Address  
Good Government Fund, Three Commercial Place

City State Zip Code  
Norfolk VA 23510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date  
5000.00

Date of Receipt  
03 / 26 / 2008

Transaction ID: C-3966-033p03

Amount of Each Receipt this Period  
1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 3500.00

**TOTAL** This Period (last page this line number only) ..... 150800.00

28020180754

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

PAGE 29 OF 40

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (in Full)

PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

**A. Oral and Maxillofacial Surgery PAC**

Mailing Address

9700 W. Bryn Mawr Ave.

City

Rosemont

State

IL

Zip Code

60018

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

03 / 26 / 2008

Transaction ID: C-4038-02ss03

Amount of Each Receipt this Period

2000.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. PathPAC**

Mailing Address

1350 I. Street NW, Suite 590

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

03 / 26 / 2008

Transaction ID: C-4115-035S02

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Rock City PAC**

Mailing Address

1015 Stone Bridge Park Dr.

City

Franklin

State

TN

Zip Code

37069

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

03 / 26 / 2008

Transaction ID: C-4526-03X302

Amount of Each Receipt this Period

2700.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....▶

5700.00

TOTAL This Period (last page this line number only) .....▶

156500.00

28020180755

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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11a  11b  11c  11d  
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Abbott Laboratories Employee PAC**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
100 Abbott Park Road  
City: Abbott Park State: IL Zip Code: 60064

FEC ID number of contributing federal political committee: **C 00040279**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  Primary  General  Other (specify): \_\_\_\_\_

Election Cycle-to-Date: **6000.00**

Date of Receipt: **03 / 27 / 2008**

Transaction ID: **C-24-01gZ08**

Amount of Each Receipt this Period: **1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Action Cmte For Rural Electrification**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
4301 Wilson Boulevard  
City: Arlington State: VA Zip Code: 22203

FEC ID number of contributing federal political committee: **C 00002972**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  Primary  General  Other (specify): \_\_\_\_\_

Election Cycle-to-Date: **8000.00**

Date of Receipt: **03 / 27 / 2008**

Transaction ID: **C-35-00040N**

Amount of Each Receipt this Period: **1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Kellogg Better Government Committee**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
P.O. Box 3599, One Kellogg Square  
City: Battle Creek State: MI Zip Code: 49016

FEC ID number of contributing federal political committee: **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  Primary  General  Other (specify): \_\_\_\_\_

Election Cycle-to-Date: **1000.00**

Date of Receipt: **03 / 27 / 2008**

Transaction ID: **C-2876-001X06**

Amount of Each Receipt this Period: **1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... **3000.00**

TOTAL This Period (last page this line number only) ..... **159500.00**

28020180756





**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

**C00128876**

Full Name (Last, First, Middle Initial)

**A. Citicorp Voluntary Political Fund**

Mailing Address

Political Action Committee - Feder, 1101 Pennsylvania Avenue NW Ste 10

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify):  
Election Cycle-to-Date **10000.00**

Date of Receipt

**03 / 28 / 2008**

Transaction ID: C-1126-02Fq0A

Amount of Each Receipt this Period

**1850.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. General Motors PAC ( GM PAC )**

Mailing Address

25 Massachusetts Avenue NW, Suite 400

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify):  
Election Cycle-to-Date **7000.00**

Date of Receipt

**03 / 28 / 2008**

Transaction ID: C-2096-035R04

Amount of Each Receipt this Period

**2000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. General Motors PAC ( GM PAC )**

Mailing Address

25 Massachusetts Avenue NW, Suite 400

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify):  
Election Cycle-to-Date **7000.00**

Date of Receipt

**03 / 28 / 2008**

Transaction ID: C-2097-035R05

Amount of Each Receipt this Period

**500.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) .....

**4350.00**

TOTAL This Period (last page this line number only) .....

**185850.00**

28020180759

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)

**A. Making Business Excel**

Mailing Address

Political Action Committee, P. O. Box 3241

City State Zip Code  
Cheyenne WY 82003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **10000.00**

Date of Receipt

M /  D /  Y  
**03 / 28 / 2008**

Transaction ID: C-3337-034z02

Amount of Each Receipt this Period

**5000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. NorthStar Leadership PAC**

Mailing Address

PO Box 28754

City State Zip Code  
Saint Paul MN 55128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **10000.00**

Date of Receipt

M /  D /  Y  
**03 / 28 / 2008**

Transaction ID: C-3968-03W802

Amount of Each Receipt this Period

**5000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Novartis Political Action Committee**

Mailing Address

701 Pennsylvania Ave. NW Suite 725

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C 00033969**

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify):  Election Cycle-to-Date **4000.00**

Date of Receipt

M /  D /  Y  
**03 / 28 / 2008**

Transaction ID: C-3981-02Q504

Amount of Each Receipt this Period

**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) **11000.00**

TOTAL This Period (last page this line number only) **196850.00**

**11000.00**

**196850.00**

28020180760

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 OF 40

11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full)

PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

**A. Wellpoint Inc. WellPAC**

Mailing Address

Marjorie Maginn Treasurer, 120 Monument Circle

City

State

Zip Code

Indianapolis

IN

46204

FEC ID number of contributing  
federal political committee.

**C** 00197228

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify): ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY  
03 / 28 / 2008

Transaction ID: C-5678-032V02

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. 21st Century Majority Fund**

Mailing Address

6065 Roswell Rd., Box 2274

City

State

Zip Code

Atlanta

GA

30328

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify): ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

MM / DD / YYYY  
03 / 31 / 2008

Transaction ID: C-4-036z04

Amount of Each Receipt this Period

2500.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. Aircraft Owners & Pilots Assn PAC**

Mailing Address

Aopa, 421 Aviation Way

City

State

Zip Code

Frederick

MD

21701

FEC ID number of contributing  
federal political committee.

**C** 00131185

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify): ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY  
03 / 31 / 2008

Transaction ID: C-82-01h906

Amount of Each Receipt this Period

1000.00

Limit increased Due to opponent's  
Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

201350.00

28020180761

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. Assn For The Advancement Of Psychology**

Mailing Address  
**(AAP/PLAN), P.O. Box 38129**

City **Colorado Spgs** State **CO** Zip Code **80937**

FEC ID number of contributing federal political committee. **C 00002956**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **2000.00**

Date of Receipt **03 / 31 / 2008**  
Transaction ID: **C-241-01Kn05**

Amount of Each Receipt this Period **1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. Baxter Healthcare PAC (BAXPAC)**

Mailing Address  
**800 Connecticut Ave NW, Suite 1100**

City **Washington** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 31 / 2008**  
Transaction ID: **C-523-03eT01**

Amount of Each Receipt this Period **1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. Blue Cross & Blue Shield P. A. C. (BluePAC)**

Mailing Address  
**1310 G. Street NW**

City **Washington** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **4000.00**

Date of Receipt **03 / 31 / 2008**  
Transaction ID: **C-728-01hD07**

Amount of Each Receipt this Period **1500.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**SUBTOTAL** of Receipts This Page (optional) **3500.00**

**TOTAL** This Period (last page this line number only) **204850.00**

28020180762

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. CAP-MPT Federal PAC**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
Cooperative of American Physicians, Dr. Patrick J. Wade

City State Zip Code  
Los Angeles CA 90071

FEC ID number of contributing federal political committee. **C** 00161604

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt: 03 / 31 / 2008  
Transaction ID: C-989-03WU02

Amount of Each Receipt this Period: 1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Council Of Insurance Agents & Brokers**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
P. A. C. Account, 701 Pennsylvania Ave. NW Ste 750

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 03 / 31 / 2008  
Transaction ID: C-1316-01ly04

Amount of Each Receipt this Period: 1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Covidien PAC**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
900 7th Street, N.W., Suite 975

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** 00433490

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 31 / 2008  
Transaction ID: C-1320-03fv01

Amount of Each Receipt this Period: 1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 3000.00

TOTAL This Period (last page this line number only) ..... 207850.00

28020180763

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Credit Suisse Securities ( Usa )**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
Political Action Committee, 1201 F. Street NW Suite 450

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ \_\_\_\_\_ **3000.00**

Date of Receipt **03 / 31 / 2008**

Transaction ID: C-1353-02r003

Amount of Each Receipt this Period **1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Croplife America PAC**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
1156 15th St. NW #400

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ \_\_\_\_\_ **8000.00**

Date of Receipt **03 / 31 / 2008**

Transaction ID: C-1362-036n03

Amount of Each Receipt this Period **2000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Croplife America PAC**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
1156 15th St. NW #400

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼ \_\_\_\_\_ **8000.00**

Date of Receipt **03 / 31 / 2008**

Transaction ID: C-1363-036n04

Amount of Each Receipt this Period **3000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... **6000.00**

**TOTAL** This Period (last page this line number only) ..... **213850.00**

2802018076A

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. FMR LLC PAC - Federal**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
82 Devonshire Street

City State Zip Code  
Boston MA 02109

FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
\_\_\_\_\_ 1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2008

Transaction ID: C-1806-03bx01

Amount of Each Receipt this Period  
\_\_\_\_\_ 1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**B. Fmc Good Government Program**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
1101 Pennsylvania Ave. NW, Suite 325

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
\_\_\_\_\_ 3000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2008

Transaction ID: C-1942-001G0H

Amount of Each Receipt this Period  
\_\_\_\_\_ 1000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**C. Fund for America's Future**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
P.O. Box 1373

City State Zip Code  
Columbia SC 29202

FEC ID number of contributing federal political committee. **C** 00388934

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
\_\_\_\_\_ 5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2008

Transaction ID: C-2054-03jZ01

Amount of Each Receipt this Period  
\_\_\_\_\_ 5000.00

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ➔ \_\_\_\_\_ 7000.00

**TOTAL** This Period (last page this line number only) ..... ➔ \_\_\_\_\_ 220850.00

28020180765

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)

**A. Independent Insurance Agents &**

Mailing Address  
Brokers of America, Inc., 412 First Street SE Ste 300

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **6000.00**

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2008

Transaction ID: C-2691-019C0F

Amount of Each Receipt this Period  
**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**B. National Turkey Federation P. A. C.**

Mailing Address  
1225 New York Avenue NW Ste 400

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **2000.00**

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2008

Transaction ID: C-3888-002409

Amount of Each Receipt this Period  
**1000.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

**C. N. E. M. P. A. C.**

Mailing Address  
National Emergency Medicine Pac, PO Box 619911

City State Zip Code  
Dallas TX 75261

FEC ID number of contributing federal political committee. **C 00140061**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify):

Election Cycle-to-Date **9500.00**

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2008

Transaction ID: C-3926-01Es05

Amount of Each Receipt this Period  
**2500.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) **4500.00**

TOTAL This Period (last page this line number only) **225350.00**

28020180766

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 OF 41

11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	C00128876
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Full Name (Last, First, Middle Initial) <b>A. SafePAC</b>	
Mailing Address <b>Safeway Inc., Political Action Com, 5918 Stoneridge Mall Road</b>	
City <b>Pleasanton</b>	State <b>CA</b>
Zip Code <b>94588</b>	
FEC ID number of contributing federal political committee.	<b>C 00194084</b>
Name of Employer	Occupation
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ <b>2500.00</b>

Date of Receipt <b>03 / 31 / 2008</b>
Transaction ID: <b>C-4650-03c901</b>
Amount of Each Receipt this Period <b>2500.00</b>
<input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

28020180767

SUBTOTAL of Receipts This Page (optional) .....	<b>2500.00</b>
TOTAL This Period (last page this line number only) .....	<b>227850.00</b>

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Roberts Victory Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address  
C/O National Republican Senatorial, 425 2ND St. NE  
City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
**478009.21**

Date of Receipt  
MM / DD / YYYY  
**02 / 27 / 2008**

Transaction ID: C-4510-03Au05

Amount of Each Receipt this Period  
**2300.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**Transfer Jt Fundraiser**

**B. Roberts Victory Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address  
C/O National Republican Senatorial, 425 2ND St. NE  
City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
**478009.21**

Date of Receipt  
MM / DD / YYYY  
**02 / 27 / 2008**

Transaction ID: C-4511-03Au06

Amount of Each Receipt this Period  
**2300.00**

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

**Transfer Jt. Fundraiser**

SUBTOTAL of Receipts This Page (optional) .....

**4600.00**

TOTAL This Period (last page this line number only) .....

**4600.00**

20020180768

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Howe, Margaret</b>		Date of Receipt MM / DD / YYYY 02 / 27 / 2008
Mailing Address Box 1168		Transaction ID: C-2589-03Zm01
City Manhattan	State KS	Zip Code 66505
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2300.00
Name of Employer Self-Employed	Occupation Homemaker	<b>Transfer fr JtMEMOraiser</b> <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 4600.00	

Full Name (Last, First, Middle Initial) <b>B. Howe, Margaret</b>		Date of Receipt MM / DD / YYYY 02 / 27 / 2008
Mailing Address Box 1168		Transaction ID: C-2590-03Zm02
City Manhattan	State KS	Zip Code 66505
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2300.00
Name of Employer Self-Employed	Occupation Homemaker	<b>Transfer fr JtMEMOraiser</b> <input type="checkbox"/> Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	Election Cycle-to-Date ▼ 4600.00	

SUBTOTAL of Receipts This Page (optional) .....	0
TOTAL This Period, (last page this line number only) .....	0

28020180769

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 2

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. Banc Of America Investment Services Inc.**

Mailing Address  
900 West Trade Street, Nci-026-05-1

City State Zip Code  
Charlotte NC 28255

Date of Receipt  
MM / DD / YYYY  
01 / 31 / 2008

Transaction ID: C-374-02GE1g

FEC ID number of contributing federal political committee. **C**

Amount of Each Receipt this Period  
8421.91

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
116657.72

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**B. Bank Of America**

Mailing Address  
2006 Broadway

City State Zip Code  
Great Bend KS 67530

Date of Receipt  
MM / DD / YYYY  
01 / 31 / 2008

Transaction ID: C-441-02GD1j

FEC ID number of contributing federal political committee. **C**

Amount of Each Receipt this Period  
7.89

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
591.86

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)  
**C. Banc Of America Investment Services Inc.**

Mailing Address  
900 West Trade Street, Nci-026-05-1

City State Zip Code  
Charlotte NC 28255

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

Transaction ID: C-375-02GE1h

FEC ID number of contributing federal political committee. **C**

Amount of Each Receipt this Period  
6386.97

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify): ▼

Election Cycle-to-Date ▼  
116657.72

Limit increased Due to opponent's Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional) ..... 14816.77

TOTAL This Period (last page this line number only) ..... 14816.77

28020180770





**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Best Buy #48</b>		Transaction ID: <b>D3-01HE0A</b>
Mailing Address <b>1600 SW Wanamaker Road</b>		Date of Disbursement <b>01 / 02 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66604</b>
Purpose of Disbursement <b>(409)Eq-Computer, Software</b>	Category/Type	Amount of Each Disbursement this Period <b>1074.45</b>
Candidate Name		<b>MEMO</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<b>Credit Card Item</b>
State: District:		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>B. Cato Travel</b>		Transaction ID: <b>D4-02to0V</b>
Mailing Address <b>Senate Russell Bld, 1ST &amp; C. St. NE</b>		Date of Disbursement <b>01 / 02 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20510</b>
Purpose of Disbursement <b>(409)Travel Fees</b>	Category/Type	Amount of Each Disbursement this Period <b>20.00</b>
Candidate Name		<b>MEMO</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<b>Credit Card Item</b>
State: District:		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>C. Crescent 4172</b>		Transaction ID: <b>D5-03HK06</b>
Mailing Address <b>512 SW Topeka Blvd</b>		Date of Disbursement <b>01 / 02 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Zip Code
Purpose of Disbursement <b>(409)Travel-Fuel</b>	Category/Type	Amount of Each Disbursement this Period <b>38.01</b>
Candidate Name		<b>MEMO</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<b>Credit Card Item</b>
State: District:		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>6179.67</b>

28020180773

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 3 OF 79

17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. Enterprise Rent-A-Car</b>		Transaction ID: D6-03IQ08 Date of Disbursement
Mailing Address 333 SW Topeka Blvd		<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
City Topeka	State KS	Zip Code 66603
Purpose of Disbursement (409)Car Rental		Amount of Each Disbursement this Period <input type="text" value="144.21"/>
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>B. Fedex</b>		Transaction ID: D7-01Du1i Date of Disbursement
Mailing Address PO Box 1140		<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
City Memphis	State TN	Zip Code 38101
Purpose of Disbursement (409)Shipping Charges		Amount of Each Disbursement this Period <input type="text" value="85.04"/>
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>C. Kansas Turnpike Authority</b>		Transaction ID: D10-01NZ0p Date of Disbursement
Mailing Address PO Box 780007		<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
City Wichita	State KS	Zip Code 67278
Purpose of Disbursement (409)Travel-Toll Chgs		Amount of Each Disbursement this Period <input type="text" value="4.50"/>
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only) .....	<input type="text" value="6179.67"/>

28020180774

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Leavenworth Country Club</b>		Transaction ID: D11-02o002
Mailing Address <b>455 W. Eisenhower Road</b>		Date of Disbursement MM / DD / YYYY <b>01 / 02 / 2008</b>
City <b>Lansing</b>	State <b>KS</b>	Amount of Each Disbursement this Period <b>1126.72</b>
Zip Code <b>66043</b>	Category/Type <input type="checkbox"/>	
Purpose of Disbursement <b>(409)Catering Cost</b>		<b>MEMO</b> <b>Credit Card Item</b> <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name		
Office Sought: State: <input type="checkbox"/> District: <input type="checkbox"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. Metro Wash Airport</b>		Transaction ID: D12-02FP07
Mailing Address <b>Parkins Operations Garage A.</b>		Date of Disbursement MM / DD / YYYY <b>01 / 02 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Amount of Each Disbursement this Period <b>17.00</b>
Zip Code <b>20001</b>	Category/Type <input type="checkbox"/>	
Purpose of Disbursement <b>(409)Travel-Parking</b>		<b>MEMO</b> <b>Credit Card Item</b> <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name		
Office Sought: State: <input type="checkbox"/> District: <input type="checkbox"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. Midwest Airlines</b>		Transaction ID: D13-02ym09
Mailing Address		Date of Disbursement MM / DD / YYYY <b>01 / 02 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Amount of Each Disbursement this Period <b>586.79</b>
Zip Code	Category/Type <input type="checkbox"/>	
Purpose of Disbursement <b>(409)Travel-Airline Tckts</b>		<b>MEMO</b> <b>Credit Card Item</b> <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name		
Office Sought: State: <input type="checkbox"/> District: <input type="checkbox"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

SUBTOTAL of Disbursements This Page (optional) .....	<b>0.00</b>
TOTAL This Period (last page this line number only) .....	<b>6179.67</b>

28020180775

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial)		Transaction ID: D15-02Jr11		
<b>A. Postmaster</b>		Date of Disbursement: <input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>		
Mailing Address Topeka Main PO		Amount of Each Disbursement this Period <input type="text" value="123.00"/> <b>MEMO</b> <b>Credit Card Item</b> <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
City	State			Zip Code
Topeka	KS			66603
Purpose of Disbursement (409)Postage				<input type="text" value=""/>
Candidate Name		Category/Type		
Office Sought:	Disbursement For:			
<input type="text"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="text"/>	<input type="checkbox"/> Other (specify): ▼			
State:	District:			

Full Name (Last, First, Middle Initial)		Transaction ID: D16-03Vt01		
<b>B. Postmaster</b>		Date of Disbursement: <input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>		
Mailing Address Franconia Post Office		Amount of Each Disbursement this Period <input type="text" value="1722.00"/> <b>MEMO</b> <b>Credit Card Item</b> <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
City	State			Zip Code
Alexandria	VA			
Purpose of Disbursement (409)Postage Christmas				<input type="text" value=""/>
Candidate Name		Category/Type		
Office Sought:	Disbursement For:			
<input type="text"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="text"/>	<input type="checkbox"/> Other (specify): ▼			
State:	District:			

Full Name (Last, First, Middle Initial)		Transaction ID: D17-03Vt02		
<b>C. Postmaster</b>		Date of Disbursement: <input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>		
Mailing Address Franconia Post Office		Amount of Each Disbursement this Period <input type="text" value="9.84"/> <b>MEMO</b> <b>Credit Card Item</b> <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
City	State			Zip Code
Alexandria	VA			
Purpose of Disbursement (409)Postage				<input type="text" value=""/>
Candidate Name		Category/Type		
Office Sought:	Disbursement For:			
<input type="text"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="text"/>	<input type="checkbox"/> Other (specify): ▼			
State:	District:			

SUBTOTAL of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only) .....	<input type="text" value="6179.67"/>

28020180778

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

**A. Senators Dining Room**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
**Dirkson Senate Office Bldg, First And C. Streets NE**

City **Washington**      State **DC**      Zip Code **20510**

Purpose of Disbursement  
**(409)Meals/Meeting Expens**

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_

Disbursement For:  
 Primary     General  
 Other (specify): ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID: **D19-02K00C**  
Date of Disbursement: **01 / 02 / 2008**

Amount of Each Disbursement this Period  
**92.00**

**MEMO**  
**Credit Card Item**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**B. Subway**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
**236 Massachusetts Ave.**

City **Washington**      State **DC**      Zip Code **20002**

Purpose of Disbursement  
**(409)Meal Expense**

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_

Disbursement For:  
 Primary     General  
 Other (specify): ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID: **D20-02us04**  
Date of Disbursement: **01 / 02 / 2008**

Amount of Each Disbursement this Period  
**7.90**

**MEMO**  
**Credit Card Item**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**C. Walmart**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
**1501 S. W. Wanamaker Road**

City **Topeka**      State **KS**      Zip Code **66604**

Purpose of Disbursement  
**(409)Supplies**

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_

Disbursement For:  
 Primary     General  
 Other (specify): ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID: **D22-01SL0M**  
Date of Disbursement: **01 / 02 / 2008**

Amount of Each Disbursement this Period  
**111.09**

**MEMO**  
**Credit Card Item**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... **0.00**

**TOTAL** This Period (last page this line number only) ..... **6179.67**

28020180777

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Walmart Stores Inc.</b>		Transaction ID: <b>D23-02wb02</b>
Mailing Address <b>#0484</b>		Date of Disbursement <b>01 / 02 / 2008</b>
City <b>Lawrence</b>	State <b>KS</b>	Amount of Each Disbursement this Period <b>121.15</b>
Purpose of Disbursement <b>(409)Supplies</b>	Category/ Type	<b>MEMO</b>
Candidate Name		<b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cottrell, Jacqueline</b>		Transaction ID: <b>D927-01KP0b</b>
Mailing Address <b>6212 Gentle Lane</b>		Date of Disbursement <b>01 / 02 / 2008</b>
City <b>Alexandria</b>	State <b>VA</b>	Amount of Each Disbursement this Period <b>23.16</b>
Purpose of Disbursement <b>Reimb-Trvl-Meal,Parking</b>	Category/ Type	
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Cox Communications,</b>		Transaction ID: <b>D938-03IG06</b>
Mailing Address <b>P. O. Box 22142</b>		Date of Disbursement <b>01 / 02 / 2008</b>
City <b>Tulsa</b>	State <b>OK</b>	Amount of Each Disbursement this Period <b>231.13</b>
Purpose of Disbursement <b>Communication Internet</b>	Category/ Type	
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>254.29</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>6433.96</b>

28020180778

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

**A. Distinctive Stationery**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
 Mailing Address  
 204 Azar Court  
 City State Zip Code  
 Baltimore MD 21227

Purpose of Disbursement  
 Printing Expenses

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D985-02yh03  
 Date of Disbursement  
 01 / 02 / 2008

Amount of Each Disbursement this Period  
 4293.00

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**B. Fox Real Estate**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
 Mailing Address  
 531 NW Tyler Court  
 City State Zip Code  
 Topeka KS 66608

Purpose of Disbursement  
 Rent-Jan 2008

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D1192-03HB06  
 Date of Disbursement  
 01 / 02 / 2008

Amount of Each Disbursement this Period  
 1500.00

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**C. Matthew Gerred**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
 Mailing Address  
 5810 Fulcher Avenue  
 City State Zip Code  
 North Hollywood CA 91601

Purpose of Disbursement  
 Breakfast, Meetings

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  
 Primary     General  
 Other (specify): ▼

Transaction ID: D1213-03X601  
 Date of Disbursement  
 01 / 02 / 2008

Amount of Each Disbursement this Period  
 3190.00

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ➔ 8983.00

**TOTAL** This Period (last page this line number only) ..... ➔ 15416.96

28020180779

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. Kansas Expocentre</b>		Transaction ID: D1487-03Vp01 Date of Disbursement
Mailing Address <b>One Expocentre Drive</b>		<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
City	State	Zip Code
<b>Topeka</b>	<b>KS</b>	<b>66612</b>
Purpose of Disbursement <b>Rent Hall for Event</b>		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="669.50"/>
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
<input type="text"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. McManus, Ashley J.</b>		Transaction ID: D1709-038R0P Date of Disbursement
Mailing Address <b>1832 SW Lincoln</b>		<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
City	State	Zip Code
<b>Topeka</b>	<b>KS</b>	<b>66604</b>
Purpose of Disbursement <b>Reimb-Travel Mileage</b>		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="218.74"/>
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
<input type="text"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Rowden, Mary E.</b>		Transaction ID: D2422-032u0b Date of Disbursement
Mailing Address <b>3137 SW Randolph Ave., Apt 207</b>		<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
City	State	Zip Code
<b>Topeka</b>	<b>KS</b>	<b>66611</b>
Purpose of Disbursement <b>Reimburse-Mileage</b>		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="126.10"/>
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
<input type="text"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1014.34"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="16431.30"/>

28020180780

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Sprint</b>		Transaction ID: <b>D2602-031Z09</b>
Mailing Address <b>PO Box 660092</b>		Date of Disbursement <b>01 / 02 / 2008</b>
City <b>Dallas</b>	State <b>TX</b>	Zip Code <b>75266</b>
Purpose of Disbursement <b>Telephone Expense</b>	Category/ Type	Amount of Each Disbursement this Period <b>55.73</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

Full Name (Last, First, Middle Initial) <b>B. Sprint</b>		Transaction ID: <b>D2609-031K05</b>
Mailing Address <b>P. O. Box 1769</b>		Date of Disbursement <b>01 / 02 / 2008</b>
City <b>Newark</b>	State <b>NJ</b>	Zip Code <b>07101</b>
Purpose of Disbursement <b>Telephone Expense</b>	Category/ Type	Amount of Each Disbursement this Period <b>127.17</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

Full Name (Last, First, Middle Initial) <b>C. The Elegant Envelope Ltd</b>		Transaction ID: <b>D2722-02yf03</b>
Mailing Address <b>1025 Connecticut Avenue NW, Suite 711</b>		Date of Disbursement <b>01 / 02 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20036</b>
Purpose of Disbursement <b>Computer Work, Addressing</b>	Category/ Type	Amount of Each Disbursement this Period <b>1643.44</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

SUBTOTAL of Disbursements This Page (optional) .....	<b>1826.34</b>
TOTAL This Period (last page this line number only) .....	<b>18257.64</b>

28020180781





**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

**A. U. S. Senate Restaurants**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address **Senate Office Bldgs, 1ST & C. Sts NW**

City **Washington**      State **DC**      Zip Code **20510**

Purpose of Disbursement **Nov Rep Pol Comm Lunches**

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_

Disbursement For:  Primary     General  
 Other (specify): ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID: **D2959-02Dz1t**  
Date of Disbursement: **01 / 04 / 2008**

Amount of Each Disbursement this Period: **39.96**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**B. Internal Revenue Service**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City **Ogden**      State **UT**      Zip Code **84201**

Purpose of Disbursement **940 - Unemploymt PR Tax**

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_

Disbursement For:  Primary     General  
 Other (specify): ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID: **D1387-02MM0f**  
Date of Disbursement: **01 / 07 / 2008**

Amount of Each Disbursement this Period: **168.00**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**C. At&T**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address **PO Box 78522**

City **Phoenix**      State **AZ**      Zip Code **85062**

Purpose of Disbursement **Telephone Service**

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_

Disbursement For:  Primary     General  
 Other (specify): ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID: **D323-03Go07**  
Date of Disbursement: **01 / 08 / 2008**

Amount of Each Disbursement this Period: **49.21**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... **257.17**

**TOTAL** This Period (last page this line number only) ..... **23247.69**

28020180784

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Linweld</b>		Transaction ID: <b>D1630-01NQ0S</b>
Mailing Address <b>Box 1858</b>		Date of Disbursement MM / DD / YYYY <b>01 / 08 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66601</b>
Purpose of Disbursement <b>Advertising-Helium</b>	Category/ Type	Amount of Each Disbursement this Period <b>35.42</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. Max Consulting</b>		Transaction ID: <b>D1661-03XP01</b>
Mailing Address <b>181 Broadway, Suite 300</b>		Date of Disbursement MM / DD / YYYY <b>01 / 08 / 2008</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10007</b>
Purpose of Disbursement <b>Fundraising Consulting</b>	Category/ Type	Amount of Each Disbursement this Period <b>330.00</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. McKellar Group Inc.</b>		Transaction ID: <b>D1679-036V09</b>
Mailing Address <b>523 Grand Boulevard, Suite 1D</b>		Date of Disbursement MM / DD / YYYY <b>01 / 08 / 2008</b>
City <b>Kansas City</b>	State <b>MO</b>	Zip Code <b>64106</b>
Purpose of Disbursement <b>Fundrsng Consulting Nov 0</b>	Category/ Type	Amount of Each Disbursement this Period <b>4000.00</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4365.42</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>27613.11</b>

2802018078

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. New Media Communications**

Full Name (Last, First, Middle Initial)  
Mailing Address  
3046 Brecksville Road  
City State Zip Code  
Richfield OH 44286

Purpose of Disbursement  
Hosting Web Site Jan '08

Candidate Name

Office Sought: \_\_\_\_\_  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  
 Primary  General  
 Other (specify): ▼

Transaction ID: D1870-031R0N  
Date of Disbursement  
MEM / DD / YYYY  
01 / 08 / 2008

Amount of Each Disbursement this Period  
150.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

**B. Bank Of America**

Full Name (Last, First, Middle Initial)  
Mailing Address  
P. O. Box 37271  
City State Zip Code  
Baltimore MD 21297

Purpose of Disbursement  
(410)Dec Payment

Candidate Name

Office Sought: \_\_\_\_\_  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  
 Primary  General  
 Other (specify): ▼

Transaction ID: D562-02wI0I  
Date of Disbursement  
MEM / DD / YYYY  
01 / 11 / 2008

Amount of Each Disbursement this Period  
3367.14

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

**C. American Airlines**

Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
Washington DC

Purpose of Disbursement  
(410)Travel-Airline Tckts

Candidate Name

Office Sought: \_\_\_\_\_  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  
 Primary  General  
 Other (specify): ▼

Transaction ID: D1-02r308  
Date of Disbursement  
MEM / DD / YYYY  
01 / 11 / 2008

Amount of Each Disbursement this Period  
583.30

**MEMO**  
**Credit Card Item**

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....  
TOTAL This Period (last page this line number only) .....

3517.14  
31130.25

28020180786

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Cato Travel</b>		Transaction ID: <b>D2-02tp0W</b>
Mailing Address <b>Senate Russell Bld, 1ST &amp; C. St. NE</b>		Date of Disbursement MM / DD / YYYY <b>01 / 11 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Amount of Each Disbursement this Period <b>20.00</b>
Zip Code <b>20510</b>	Category/Type <b>MEMO</b>	
Purpose of Disbursement <b>(410)Travel Fee</b>		<b>Credit Card Item</b>
Candidate Name		
Office Sought: State: <input type="checkbox"/> District: <input type="checkbox"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. Delta Air,</b>		Transaction ID: <b>D3-02uZ07</b>
Mailing Address		Date of Disbursement MM / DD / YYYY <b>01 / 11 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Amount of Each Disbursement this Period <b>668.81</b>
Zip Code	Category/Type <b>MEMO</b>	
Purpose of Disbursement <b>(410)Travel-Airline Ticke</b>		<b>See memo entries</b>
Candidate Name		
Office Sought: State: <input type="checkbox"/> District: <input type="checkbox"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. Goodland Daily News</b>		Transaction ID: <b>D4-03OK03</b>
Mailing Address		Date of Disbursement MM / DD / YYYY <b>01 / 11 / 2008</b>
City <b>Goodland</b>	State <b>KS</b>	Amount of Each Disbursement this Period <b>99.90</b>
Zip Code <b>67735</b>	Category/Type <b>MEMO</b>	
Purpose of Disbursement <b>(410)Townhall Mtg-Ad</b>		<b>Credit Card Item</b>
Candidate Name		
Office Sought: State: <input type="checkbox"/> District: <input type="checkbox"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

SUBTOTAL of Disbursements This Page (optional) .....	<b>0.00</b>
TOTAL This Period (last page this line number only) .....	<b>31130.25</b>

28020180787

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Hunan Dynasty</b>		Transaction ID: <b>D5-02ub03</b>
Mailing Address <b>215 Pennsylvania Ave. SE</b>		Date of Disbursement MM / DD / YYYY <b>01 / 11 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20003</b>
Purpose of Disbursement <b>(410)Meals-Staff</b>	Category/ Type	Amount of Each Disbursement this Period <b>230.00</b>
Candidate Name		<b>MEMO</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Loews Vanderbilt Hotel</b>		Transaction ID: <b>D6-03XN01</b>
Mailing Address <b>2100 West End Avenue</b>		Date of Disbursement MM / DD / YYYY <b>01 / 11 / 2008</b>
City <b>Nashville</b>	State <b>TN</b>	Zip Code <b>37203</b>
Purpose of Disbursement <b>(410)Travel-Lodging</b>	Category/ Type	Amount of Each Disbursement this Period <b>319.79</b>
Candidate Name		<b>MEMO</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Office Depot</b>		Transaction ID: <b>D7-01NG0S</b>
Mailing Address <b>6700 B. Richmond Highway</b>		Date of Disbursement MM / DD / YYYY <b>01 / 11 / 2008</b>
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22306</b>
Purpose of Disbursement <b>(410)Office Supplies</b>	Category/ Type	Amount of Each Disbursement this Period <b>17.82</b>
Candidate Name		<b>MEMO</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>31130.25</b>

28020180788

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial)		Transaction ID: D8-01NG0T	
<b>A. Office Depot</b>		Date of Disbursement	
Mailing Address 6700 B. Richmond Highway		MM / DD / YYYY 01 / 11 / 2008	
City Alexandria	State VA	Zip Code 22306	Amount of Each Disbursement this Period 12.48
Purpose of Disbursement (410)Office Supplies	MEMO		
Candidate Name	Credit Card Item		
Office Sought:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		

Full Name (Last, First, Middle Initial)		Transaction ID: D9-03XK01	
<b>B. Renaissance Montura Hotel</b>		Date of Disbursement	
Mailing Address 9620 Airport Boulevard		MM / DD / YYYY 01 / 11 / 2008	
City Los Angeles	State CA	Zip Code 90045	Amount of Each Disbursement this Period 580.03
Purpose of Disbursement (410)Travel-Lodging	MEMO		
Candidate Name	Credit Card Item		
Office Sought:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		

Full Name (Last, First, Middle Initial)		Transaction ID: D11-02Dq1j	
<b>C. Senate Gift Shop</b>		Date of Disbursement	
Mailing Address Senate Dirksen Bldg, Sdg-42		MM / DD / YYYY 01 / 11 / 2008	
City Washington	State DC	Zip Code 20510	Amount of Each Disbursement this Period 68.75
Purpose of Disbursement (410)Gifts	MEMO		
Candidate Name	Credit Card Item		
Office Sought:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		

SUBTOTAL of Disbursements This Page (optional) .....	0.00
TOTAL This Period (last page this line number only) .....	31130.25

20020180789

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) \_\_\_\_\_

**A. Senate Gift Shop**      Transaction ID: D12-02Dq1k  
Date of Disbursement: 01 / 11 / 2008

Mailing Address: Senate Dirksen Bldg, Sdg-42

City: Washington      State: DC      Zip Code: 20510

Purpose of Disbursement: (410) Gift Expense      Amount of Each Disbursement this Period: 81.50

Candidate Name: \_\_\_\_\_      Category/Type: \_\_\_\_\_

Office Sought: \_\_\_\_\_      Disbursement For:  Primary     General

State: \_\_\_\_\_      District: \_\_\_\_\_       Other (specify): ▼       Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) \_\_\_\_\_

**B. United Air**      Transaction ID: D15-03XO01  
Date of Disbursement: 01 / 11 / 2008

Mailing Address: \_\_\_\_\_

City: Arlington      State: VA      Zip Code: \_\_\_\_\_

Purpose of Disbursement: (410) Travel-Airline Tckts      Amount of Each Disbursement this Period: 398.80

Candidate Name: \_\_\_\_\_      Category/Type: \_\_\_\_\_

Office Sought: \_\_\_\_\_      Disbursement For:  Primary     General

State: \_\_\_\_\_      District: \_\_\_\_\_       Other (specify): ▼       Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) \_\_\_\_\_

**C. Vaso's Kitchen**      Transaction ID: D16-031g02  
Date of Disbursement: 01 / 11 / 2008

Mailing Address: 1225 Powhatan St.

City: Alexandria      State: VA      Zip Code: 22314

Purpose of Disbursement: (410) Staff Lunch      Amount of Each Disbursement this Period: 38.62

Candidate Name: \_\_\_\_\_      Category/Type: \_\_\_\_\_

Office Sought: \_\_\_\_\_      Disbursement For:  Primary     General

State: \_\_\_\_\_      District: \_\_\_\_\_       Other (specify): ▼       Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... 0.00

TOTAL This Period (last page this line number only) ..... 31130.25

28020180790



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Kansas Secretary Of State**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
 Mailing Address  
 State Capitol  
 City State Zip Code  
 Topeka KS 66612

Purpose of Disbursement  
 Filing Fee

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  
 Primary  General  
 Other (specify): ▼

Transaction ID: D1518-013104  
 Date of Disbursement: 01 / 14 / 2008

Amount of Each Disbursement this Period: 1672.00

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**B. Matrix**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
 Mailing Address  
 P. O. Box 742501  
 City State Zip Code  
 Cincinnati OH 45274

Purpose of Disbursement  
 Comm Teleconferencing

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  
 Primary  General  
 Other (specify): ▼

Transaction ID: D1658-03JX03  
 Date of Disbursement: 01 / 14 / 2008

Amount of Each Disbursement this Period: 129.04

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**C. McKellar Group Inc.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
 Mailing Address  
 523 Grand Boulevard, Suite 1D  
 City State Zip Code  
 Kansas City MO 64106

Purpose of Disbursement  
 Fundrsng Consulting Dec

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  
 Primary  General  
 Other (specify): ▼

Transaction ID: D1680-036v0A  
 Date of Disbursement: 01 / 14 / 2008

Amount of Each Disbursement this Period: 4000.00

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... 5801.04

TOTAL This Period (last page this line number only) ..... 37215.32

28020180792

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Postmaster-Great Bend</b>		Transaction ID: D2042-01771P
Mailing Address		Date of Disbursement MM / DD / YYYY 01 / 14 / 2008
City Great Bend	State KS	Zip Code 67530
Purpose of Disbursement Postage Expense	Category/ Type	Amount of Each Disbursement this Period 41.00
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. Sprint</b>		Transaction ID: D2610-031K06
Mailing Address P. O. Box 1769		Date of Disbursement MM / DD / YYYY 01 / 14 / 2008
City Newark	State NJ	Zip Code 07101
Purpose of Disbursement Telephone Service	Category/ Type	Amount of Each Disbursement this Period 125.18
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. Internal Revenue Service</b>		Transaction ID: D1385-02MM0d
Mailing Address		Date of Disbursement MM / DD / YYYY 01 / 15 / 2008
City Ogden	State UT	Zip Code 84201
Purpose of Disbursement 941 Payroll Taxes	Category/ Type	Amount of Each Disbursement this Period 686.20
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

SUBTOTAL of Disbursements This Page (optional) .....	852.38
TOTAL This Period (last page this line number only) .....	38067.70

28020180793

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) **A. McManus, Ashley J.**

Mailing Address  
**1832 SW Lincoln**

City **Topeka**      State **KS**      Zip Code **66604**

Purpose of Disbursement  
**Salary**

Candidate Name

Office Sought:      District:      Disbursement For:  
 Primary     General  
 Other (specify): ▼

State:      District:

Transaction ID: **D1710-038R0Q**  
Date of Disbursement: **01 / 15 / 2008**

Amount of Each Disbursement this Period: **840.95**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) **B. Rowden, Mary E.**

Mailing Address  
**3137 SW Randolph Ave., Apt 207**

City **Topeka**      State **KS**      Zip Code **66611**

Purpose of Disbursement  
**Salary**

Candidate Name

Office Sought:      District:      Disbursement For:  
 Primary     General  
 Other (specify): ▼

State:      District:

Transaction ID: **D2423-032u0c**  
Date of Disbursement: **01 / 15 / 2008**

Amount of Each Disbursement this Period: **1090.22**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) **C. Winfrey & Company**

Mailing Address  
**228 South Washington Street, Suite B-20**

City **Alexandria**      State **VA**      Zip Code **22314**

Purpose of Disbursement  
**Fundrsng Consitng Jan 08**

Candidate Name

Office Sought:      District:      Disbursement For:  
 Primary     General  
 Other (specify): ▼

State:      District:

Transaction ID: **D3200-02dX1G**  
Date of Disbursement: **01 / 15 / 2008**

Amount of Each Disbursement this Period: **10350.54**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... **12281.71**

**TOTAL** This Period (last page this line number only) ..... **50349.41**

28020180794

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Ball Consulting Group</b>		Transaction ID: <b>D371-034d07</b>
Mailing Address <b>PO Box 1511</b>		Date of Disbursement <b>01 / 18 / 2008</b>
City <b>Great Bend</b>	State <b>KS</b>	Zip Code <b>67530</b>
Purpose of Disbursement <b>Bkkpg/Actng Oct/Nov/Dec</b>	Category/ Type	Amount of Each Disbursement this Period <b>10134.47</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

Full Name (Last, First, Middle Initial) <b>B. Bank Of America</b>		Transaction ID: <b>D446-02GY1s</b>
Mailing Address <b>PO Box 15731</b>		Date of Disbursement <b>01 / 18 / 2008</b>
City <b>Wilmington</b>	State <b>DE</b>	Zip Code <b>19886</b>
Purpose of Disbursement <b>(411)Dec Payment</b>	Category/ Type	Amount of Each Disbursement this Period <b>3310.93</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

Full Name (Last, First, Middle Initial) <b>C. Bank Of America</b>		Transaction ID: <b>D1-02GY1t</b>
Mailing Address <b>PO Box 15731</b>		Date of Disbursement <b>01 / 18 / 2008</b>
City <b>Wilmington</b>	State <b>DE</b>	Zip Code <b>19886</b>
Purpose of Disbursement <b>(411)Annual Membership Fee</b>	Category/ Type	Amount of Each Disbursement this Period <b>30.00</b>
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b> <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

SUBTOTAL of Disbursements This Page (optional) .....	<b>13445.40</b>
TOTAL This Period (last page this line number only) .....	<b>63794.81</b>

28020180795

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial)		Transaction ID: D2-02GY1u	
<b>A. Bank Of America</b>		Date of Disbursement	
Mailing Address PO Box 15731		MM / DD / YYYY 01 / 18 / 2008	
City	State	Zip Code	Amount of Each Disbursement this Period <input type="text" value="30.00"/>
Wilmington	DE	19886	
Purpose of Disbursement (411)Annual Membership Fe		Category/ Type	<b>MEMO</b> <b>Credit Card Item</b>
Candidate Name			
Office Sought:	Disbursement For:		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
State:	<input type="checkbox"/> Other (specify): ▼		

Full Name (Last, First, Middle Initial)		Transaction ID: D3-03XY01	
<b>B. Boston Coach</b>		Date of Disbursement	
Mailing Address		MM / DD / YYYY 01 / 18 / 2008	
City	State	Zip Code	Amount of Each Disbursement this Period <input type="text" value="561.95"/>
Purpose of Disbursement (411)Car Rental		Category/ Type	<b>MEMO</b> <b>Credit Card Item</b>
Candidate Name			
Office Sought:	Disbursement For:		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
State:	<input type="checkbox"/> Other (specify): ▼		

Full Name (Last, First, Middle Initial)		Transaction ID: D4-02uZ08	
<b>C. Delta Air,</b>		Date of Disbursement	
Mailing Address		MM / DD / YYYY 01 / 18 / 2008	
City	State	Zip Code	Amount of Each Disbursement this Period <input type="text" value="668.81"/>
Washington	DC		
Purpose of Disbursement (411)Travel-Airline Tckts		Category/ Type	<b>MEMO</b> <b>See memo entries</b>
Candidate Name			
Office Sought:	Disbursement For:		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
State:	<input type="checkbox"/> Other (specify): ▼		

SUBTOTAL of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only) .....	<input type="text" value="63794.81"/>

28020180796

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Fedex**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Transaction ID: D5-01Du1j  
Date of Disbursement: 01 / 18 / 2008

Mailing Address: PO Box 1140

City: Memphis State: TN Zip Code: 38101

Purpose of Disbursement: (411)Shipping Expense

Candidate Name: \_\_\_\_\_

Amount of Each Disbursement this Period: 119.77

**MEMO**  
**Credit Card Item**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Office Sought: \_\_\_\_\_ Disbursement For:  Primary  General  
 Other (specify): ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

**B. Fedex Kinko's #0180**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Transaction ID: D6-03IP0A  
Date of Disbursement: 01 / 18 / 2008

Mailing Address: 805 S. Kansas Ave.

City: Topeka State: KS Zip Code: 66612

Purpose of Disbursement: (411)Printing -fliers

Candidate Name: \_\_\_\_\_

Amount of Each Disbursement this Period: 246.60

**MEMO**  
**Credit Card Item**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Office Sought: \_\_\_\_\_ Disbursement For:  Primary  General  
 Other (specify): ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

**C. Food Lion #1315**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Transaction ID: D7-02pj0P  
Date of Disbursement: 01 / 18 / 2008

Mailing Address: \_\_\_\_\_

City: Edgewater State: MD Zip Code: \_\_\_\_\_

Purpose of Disbursement: (411)Food/Drink Expense

Candidate Name: \_\_\_\_\_

Amount of Each Disbursement this Period: 39.19

**MEMO**  
**Credit Card Item**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Office Sought: \_\_\_\_\_ Disbursement For:  Primary  General  
 Other (specify): ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

SUBTOTAL of Disbursements This Page (optional) ..... 0.00

TOTAL This Period (last page this line number only) ..... 63794.81

28020180797

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Kansas Turnpike Authority</b>		Transaction ID: <b>D9-01NZ0q</b>
Mailing Address <b>PO Box 780007</b>		Date of Disbursement MM / DD / YYYY <b>01 / 18 / 2008</b>
City <b>Wichita</b>	State <b>KS</b>	Zip Code <b>67278</b>
Purpose of Disbursement <b>(411)Travel-Toll chg</b>	Category/ Type	Amount of Each Disbursement this Period <b>2.15</b>
Candidate Name		<b>MEMO</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Midwest Airlines</b>		Transaction ID: <b>D11-02ym0A</b>
Mailing Address		Date of Disbursement MM / DD / YYYY <b>01 / 18 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code
Purpose of Disbursement <b>(411)Travel-Airline Tckts</b>	Category/ Type	Amount of Each Disbursement this Period <b>301.00</b>
Candidate Name		<b>MEMO</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Monocle On Capitol Hill</b>		Transaction ID: <b>D12-02Fm0i</b>
Mailing Address <b>107 D. St. NE</b>		Date of Disbursement MM / DD / YYYY <b>01 / 18 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20002</b>
Purpose of Disbursement <b>(411)Meeting/Meal</b>	Category/ Type	Amount of Each Disbursement this Period <b>27.88</b>
Candidate Name		<b>MEMO</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	<b>0.00</b>
TOTAL This Period (last page this line number only) .....	<b>63794.81</b>

28020180798

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Network Solutions</b>		Transaction ID: <b>D13-02Ph04</b>
Mailing Address <b>505 Huntmar Park Drive</b>		Date of Disbursement MM / DD / YYYY <b>01 / 18 / 2008</b>
City <b>Herndon</b>	State <b>VA</b>	Zip Code <b>20170</b>
Purpose of Disbursement <b>(411)Website-Domain Names</b>	Category/ Type <b>MEMO</b>	Amount of Each Disbursement this Period <b>699.80</b>
Candidate Name	Office Sought: State: District:	<b>Credit Card Item</b>
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53	

Full Name (Last, First, Middle Initial) <b>B. Officemax #459</b>		Transaction ID: <b>D14-02WP04</b>
Mailing Address <b>2109 S. W. Fairlawn Plaza</b>		Date of Disbursement MM / DD / YYYY <b>01 / 18 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66614</b>
Purpose of Disbursement <b>(411)Office supplies</b>	Category/ Type <b>MEMO</b>	Amount of Each Disbursement this Period <b>65.04</b>
Candidate Name	Office Sought: State: District:	<b>Credit Card Item</b>
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53	

Full Name (Last, First, Middle Initial) <b>C. Postmaster</b>		Transaction ID: <b>D15-02Jr1J</b>
Mailing Address <b>Topeka Main PO</b>		Date of Disbursement MM / DD / YYYY <b>01 / 18 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66603</b>
Purpose of Disbursement <b>(411)Postage</b>	Category/ Type <b>MEMO</b>	Amount of Each Disbursement this Period <b>123.00</b>
Candidate Name	Office Sought: State: District:	<b>Credit Card Item</b>
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53	

SUBTOTAL of Disbursements This Page (optional) .....	<b>0.00</b>
TOTAL This Period (last page this line number only) .....	<b>63794.81</b>

667010799

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Postmaster</b>		Transaction ID: D16-02vp09 Date of Disbursement: 01 / 18 / 2008
Mailing Address Edgewater Postal Store		Amount of Each Disbursement this Period 123.00 <b>MEMO</b> <b>Credit Card Item</b>
City Edgewater	State MD	
Purpose of Disbursement (411)Postage-300 stamps	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Senate Gift Shop</b>		Transaction ID: D18-02Dq11 Date of Disbursement: 01 / 18 / 2008
Mailing Address Senate Dirksen Bldg, Sdg-42		Amount of Each Disbursement this Period 31.50 <b>MEMO</b> <b>Credit Card Item</b>
City Washington	State DC	
Purpose of Disbursement (411)Gift Expense	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Stanley Flowers Inc.</b>		Transaction ID: D19-01SV07 Date of Disbursement: 01 / 18 / 2008
Mailing Address 1300 SW 6TH		Amount of Each Disbursement this Period 142.91 <b>MEMO</b> <b>Credit Card Item</b>
City Topeka	State KS	
Purpose of Disbursement (411)Flowers	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional) .....	0.00
TOTAL This Period (last page this line number only) .....	63794.81

28020180800

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
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Full Name (Last, First, Middle Initial) <b>A. Native Sons &amp; Daughters Of Kansas</b>		Transaction ID: <b>D1842-02un05</b>
Mailing Address <b>PO Box 546</b>		Date of Disbursement MM / DD / YYYY <b>01 / 18 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66601</b>
Purpose of Disbursement <b>Banquet Tickets</b>	Category/ Type	Amount of Each Disbursement this Period <b>240.00</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State:      District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. Haas &amp; Wilkerson</b>		Transaction ID: <b>D1238-01210E</b>
Mailing Address <b>P. O. Box 2946, Fair Department</b>		Date of Disbursement MM / DD / YYYY <b>01 / 23 / 2008</b>
City <b>Shawnee Mission</b>	State <b>KS</b>	Zip Code <b>66201</b>
Purpose of Disbursement <b>Insurance for Booth Space</b>	Category/ Type	Amount of Each Disbursement this Period <b>88.00</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State:      District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. Kansas Day Club</b>		Transaction ID: <b>D1482-012000</b>
Mailing Address <b>PO Box 2153</b>		Date of Disbursement MM / DD / YYYY <b>01 / 23 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66601</b>
Purpose of Disbursement <b>Tickets-Banquet</b>	Category/ Type	Amount of Each Disbursement this Period <b>850.00</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State:      District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1178.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>64972.81</b>



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Sprint</b>		Transaction ID: D2603-031Z0A Date of Disbursement: 01 / 23 / 2008
Mailing Address PO Box 660092		Amount of Each Disbursement this Period 412.10
City Dallas	State TX	
Zip Code 75266		
Purpose of Disbursement Telephone Expense	Category/Type	
Candidate Name		
Office Sought:	Disbursement For:	
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

Full Name (Last, First, Middle Initial) <b>B. At&amp;T Mobility</b>		Transaction ID: D338-03HZ0B Date of Disbursement: 01 / 28 / 2008
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 55.85
City Carol Stream	State IL	
Zip Code 60197		
Purpose of Disbursement Telephone Expense	Category/Type	
Candidate Name		
Office Sought:	Disbursement For:	
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

Full Name (Last, First, Middle Initial) <b>C. Linweld</b>		Transaction ID: D1631-01NQ0T Date of Disbursement: 01 / 28 / 2008
Mailing Address Box 1858		Amount of Each Disbursement this Period 40.60
City Topeka	State KS	
Zip Code 66601		
Purpose of Disbursement Advertising-Helium	Category/Type	
Candidate Name		
Office Sought:	Disbursement For:	
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

SUBTOTAL of Disbursements This Page (optional) .....	508.55
TOTAL This Period (last page this line number only) .....	71024.93

28020180803





**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Postmaster-Great Bend</b>		Transaction ID: D2043-01771Q Date of Disbursement: <input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>	
Mailing Address		Amount of Each Disbursement this Period <input type="text" value="15.90"/>	
City	State		Category/ Type
Great Bend	KS		
Purpose of Disbursement Postage			
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53	
Office Sought:	Disbursement For:		
<input type="checkbox"/> State: <input type="checkbox"/> District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		

Full Name (Last, First, Middle Initial) <b>B. Rowden, Mary E.</b>		Transaction ID: D2424-032u0d Date of Disbursement: <input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>	
Mailing Address 3137 SW Randolph Ave., Apt 207		Amount of Each Disbursement this Period <input type="text" value="1090.21"/>	
City	State		Category/ Type
Topeka	KS		
Purpose of Disbursement Salary			
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53	
Office Sought:	Disbursement For:		
<input type="checkbox"/> State: <input type="checkbox"/> District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		

Full Name (Last, First, Middle Initial) <b>C. At&amp;T</b>		Transaction ID: D324-03Go08 Date of Disbursement: <input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>	
Mailing Address PO Box 78522		Amount of Each Disbursement this Period <input type="text" value="68.52"/>	
City	State		Category/ Type
Phoenix	AZ		
Purpose of Disbursement Telephone Expense			
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53	
Office Sought:	Disbursement For:		
<input type="checkbox"/> State: <input type="checkbox"/> District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		

SUBTOTAL of Disbursements This Page (optional) .....	<input type="text" value="1174.63"/>
TOTAL This Period (last page this line number only) .....	<input type="text" value="92022.67"/>

200201800000

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Capitol Plaza Hotel</b>		Transaction ID: <b>D649-02FI0b</b>
Mailing Address <b>1717 SW Topeka Blvd</b>		Date of Disbursement <b>01 / 31 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66612</b>
Purpose of Disbursement <b>Meals-Banquets-KS Day</b>	Category/ Type	Amount of Each Disbursement this Period <b>3526.94</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Chris Cakes, Inc.</b>		Transaction ID: <b>D713-03XI01</b>
Mailing Address <b>PO Box 188</b>		Date of Disbursement <b>01 / 31 / 2008</b>
City <b>Louisburg</b>	State <b>KS</b>	Zip Code <b>66053</b>
Purpose of Disbursement <b>Food-Pancake Fundraiser</b>	Category/ Type	Amount of Each Disbursement this Period <b>815.81</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Cottrell, Jacqueline</b>		Transaction ID: <b>D928-01KP0c</b>
Mailing Address <b>6212 Gentle Lane</b>		Date of Disbursement <b>01 / 31 / 2008</b>
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22310</b>
Purpose of Disbursement <b>Reimb-Travel,Taxi,Tolls</b>	Category/ Type	Amount of Each Disbursement this Period <b>26.30</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....

**4369.05**

TOTAL This Period (last page this line number only) .....

**96391.72**

28020180807

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Cox Communications,</b>		Transaction ID: <b>D939-03IG07</b>
Mailing Address <b>P. O. Box 22142</b>		Date of Disbursement <b>01 / 31 / 2008</b>
City <b>Tulsa</b>	State <b>OK</b>	Amount of Each Disbursement this Period <b>231.12</b>
Zip Code <b>74121</b>		
Purpose of Disbursement <b>Communication Internet</b>		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name		
Office Sought:	Disbursement For:	
State: <input type="checkbox"/> District: <input type="checkbox"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. Embroidery Plus</b>		Transaction ID: <b>D1021-03Vk02</b>
Mailing Address <b>1010 N. Kansas Ave</b>		Date of Disbursement <b>01 / 31 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Amount of Each Disbursement this Period <b>359.96</b>
Zip Code <b>66608</b>		
Purpose of Disbursement <b>Advertising-T shirts</b>		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name		
Office Sought:	Disbursement For:	
State: <input type="checkbox"/> District: <input type="checkbox"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. Rowden, Mary E.</b>		Transaction ID: <b>D2425-032u0e</b>
Mailing Address <b>3137 SW Randolph Ave., Apt 207</b>		Date of Disbursement <b>01 / 31 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Amount of Each Disbursement this Period <b>250.00</b>
Zip Code <b>66611</b>		
Purpose of Disbursement <b>Petty Cash</b>		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name		
Office Sought:	Disbursement For:	
State: <input type="checkbox"/> District: <input type="checkbox"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

SUBTOTAL of Disbursements This Page (optional) .....	<b>841.08</b>
TOTAL This Period (last page this line number only) .....	<b>97232.80</b>

28020180808

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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20b     19a  
20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Transaction ID: <b>D3049-02Mn1M</b>
Mailing Address <b>P. O. Box 660108</b>		Date of Disbursement <b>01 / 31 / 2008</b>
City <b>Dallas</b>	State <b>TX</b>	Zip Code <b>75266</b>
Purpose of Disbursement <b>Telephone Expense</b>	Category/ Type	Amount of Each Disbursement this Period <b>161.65</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State:      District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. At&amp;T Mobility</b>		Transaction ID: <b>D339-03HZ0C</b>
Mailing Address <b>PO Box 6463</b>		Date of Disbursement <b>02 / 04 / 2008</b>
City <b>Carol Stream</b>	State <b>IL</b>	Zip Code <b>60197</b>
Purpose of Disbursement <b>Telephone Service</b>	Category/ Type	Amount of Each Disbursement this Period <b>88.46</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State:      District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. Highwood Capital, LLC</b>		Transaction ID: <b>D1279-03YI01</b>
Mailing Address <b>915 E Street, NW, #613</b>		Date of Disbursement <b>02 / 04 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20004</b>
Purpose of Disbursement <b>Fundrsng Consulting Feb 08</b>	Category/ Type	Amount of Each Disbursement this Period <b>5000.00</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State:      District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5250.11</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>102482.91</b>

28020180809

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

C00128876

Full Name (Last, First, Middle Initial) <b>A. Linweld</b>		Transaction ID: D1632-01NQ0U
Mailing Address Box 1858		Date of Disbursement MM / DD / YYYY 02 / 04 / 2008
City Topeka	State KS	Zip Code 66601
Purpose of Disbursement Advertising-Helium Cylind	Category/ Type	Amount of Each Disbursement this Period 5.83
Candidate Name		
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. Roberts, Franki</b>		Transaction ID: D2351-01Em1C
Mailing Address 2203 White Oakes Drive		Date of Disbursement MM / DD / YYYY 02 / 04 / 2008
City Alexandria	State VA	Zip Code 22306
Purpose of Disbursement Cong. Club Luncheons	Category/ Type	Amount of Each Disbursement this Period 400.00
Candidate Name		
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. U. S. Senate Restaurants</b>		Transaction ID: D2960-02Dz1u
Mailing Address Senate Office Bldgs, 1ST & C. Sts NW		Date of Disbursement MM / DD / YYYY 02 / 04 / 2008
City Washington	State DC	Zip Code 20510
Purpose of Disbursement Rep. Policy Lunch-Dec 18	Category/ Type	Amount of Each Disbursement this Period 19.98
Candidate Name		
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

SUBTOTAL of Disbursements This Page (optional) .....

425.81

TOTAL This Period (last page this line number only) .....

102908.72

28020180810

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. U. S. Senate Restaurants</b>		Transaction ID: <b>D2961-02Dz1v</b> Date of Disbursement: <b>02 / 04 / 2008</b>
Mailing Address <b>Senate Office Bldgs, 1ST &amp; C. Sts NW</b>		Amount of Each Disbursement this Period <b>700.00</b>
City <b>Washington</b>	State <b>DC</b>	
Zip Code <b>20510</b>		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Purpose of Disbursement <b>Lunches-Policy/Steering</b>		
Candidate Name		
Office Sought:	Disbursement For:	
State: <input type="checkbox"/> District: <input type="checkbox"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. Wilson Grand Communications Inc.</b>		Transaction ID: <b>D3135-01Ej14</b> Date of Disbursement: <b>02 / 04 / 2008</b>
Mailing Address <b>429 N. Saint Asaph Street</b>		Amount of Each Disbursement this Period <b>3960.00</b>
City <b>Alexandria</b>	State <b>VA</b>	
Zip Code <b>22314</b>		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Purpose of Disbursement <b>Location Photo Shoot</b>		
Candidate Name		
Office Sought:	Disbursement For:	
State: <input type="checkbox"/> District: <input type="checkbox"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. Pro Print Incorporated</b>		Transaction ID: <b>D2130-01SE0k</b> Date of Disbursement: <b>02 / 05 / 2008</b>
Mailing Address <b>2028 S. W. Gage Boulevard</b>		Amount of Each Disbursement this Period <b>64.20</b>
City <b>Topeka</b>	State <b>KS</b>	
Zip Code <b>66604</b>		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Purpose of Disbursement <b>Printing Expense</b>		
Candidate Name		
Office Sought:	Disbursement For:	
State: <input type="checkbox"/> District: <input type="checkbox"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

SUBTOTAL of Disbursements This Page (optional) .....	<b>4724.20</b>
TOTAL This Period (last page this line number only) .....	<b>107632.92</b>

28020180812

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. Quik Print</b>		Transaction ID: D2258-021L0e
Mailing Address Printing & Copying, 6300A SW 9TH Terrace		Date of Disbursement MM / DD / YYYY 02 / 05 / 2008
City Topeka	State KS	Zip Code 66615
Purpose of Disbursement Printing Expense	Candidate Name	Amount of Each Disbursement this Period 128.25
Office Sought:    State:    District:		
		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>B. Wolfe's Camera Shops Inc.</b>		Transaction ID: D3224-02EM0m
Mailing Address 635 Kansas Ave., P. O. Box 1437		Date of Disbursement MM / DD / YYYY 02 / 05 / 2008
City Topeka	State KS	Zip Code 66601
Purpose of Disbursement Photography Expense	Candidate Name	Amount of Each Disbursement this Period 36.44
Office Sought:    State:    District:		
		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>C. Kansas Rental Inc.</b>		Transaction ID: D1506-02wd03
Mailing Address 926 N. Topeka Ave.		Date of Disbursement MM / DD / YYYY 02 / 06 / 2008
City Topeka	State KS	Zip Code 66608
Purpose of Disbursement Rental for Tablecloths-FR	Candidate Name	Amount of Each Disbursement this Period 128.94
Office Sought:    State:    District:		
		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....	293.63
TOTAL This Period (last page this line number only) .....	107926.55

200201803112

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Kensinger &amp; Associates</b>		Transaction ID: D1558-03YJ01
Mailing Address PO Box 67146		Date of Disbursement MM / DD / YYYY 02 / 06 / 2008
City Topeka	State KS	Zip Code 66667
Purpose of Disbursement Data Processing-Jan 08	Category/ Type	Amount of Each Disbursement this Period 3300.00
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For:	
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. Bellwether Consulting Group</b>		Transaction ID: D574-03YL01
Mailing Address 1111 19th Street, NW, Suite 1150		Date of Disbursement MM / DD / YYYY 02 / 08 / 2008
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Fundrsng Consulting Feb 08	Category/ Type	Amount of Each Disbursement this Period 5000.00
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For:	
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. New Media Communications</b>		Transaction ID: D1871-031R00
Mailing Address 3046 Brecksville Road		Date of Disbursement MM / DD / YYYY 02 / 08 / 2008
City Richfield	State OH	Zip Code 44286
Purpose of Disbursement Hosting Web Site Feb '08	Category/ Type	Amount of Each Disbursement this Period 150.00
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For:	
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

SUBTOTAL of Disbursements This Page (optional) .....	8450.00
TOTAL This Period (last page this line number only) .....	116376.55

28020180813

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. At&amp;T</b>		Transaction ID: <b>D315-02zd0K</b>
Mailing Address <b>P. O. Box 630047</b>		Date of Disbursement MM / DD / YYYY <b>02 / 12 / 2008</b>
City <b>Dallas</b>	State <b>TX</b>	Zip Code <b>75263</b>
Purpose of Disbursement <b>Telephone Expense</b>	Category/Type <input type="checkbox"/>	Amount of Each Disbursement this Period <b>126.08</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. At&amp;T Mobility</b>		Transaction ID: <b>D354-031F0D</b>
Mailing Address <b>P. O. Box 650553</b>		Date of Disbursement MM / DD / YYYY <b>02 / 12 / 2008</b>
City <b>Dallas</b>	State <b>TX</b>	Zip Code
Purpose of Disbursement <b>Phone Expense</b>	Category/Type <input type="checkbox"/>	Amount of Each Disbursement this Period <b>221.02</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. At&amp;T Mobility</b>		Transaction ID: <b>D355-031F0E</b>
Mailing Address <b>P. O. Box 650553</b>		Date of Disbursement MM / DD / YYYY <b>02 / 12 / 2008</b>
City <b>Dallas</b>	State <b>TX</b>	Zip Code
Purpose of Disbursement <b>Telephone Expense</b>	Category/Type <input type="checkbox"/>	Amount of Each Disbursement this Period <b>61.48</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>408.58</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>116785.13</b>

28020180814

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)		Transaction ID: D563-02wI0m	
<b>A. Bank Of America</b>		Date of Disbursement	
Mailing Address P. O. Box 37271		MM / DD / YYYY 02 / 12 / 2008	
City Baltimore	State MD	Zip Code 21297	Amount of Each Disbursement this Period
Purpose of Disbursement (412)Jan 2008 Payment		Category/ Type	1397.56
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53	
Office Sought:	Disbursement For:		
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		

Full Name (Last, First, Middle Initial)		Transaction ID: D1-03HZ0D	
<b>B. At&amp;T Mobility</b>		Date of Disbursement	
Mailing Address PO Box 6463		MM / DD / YYYY 02 / 12 / 2008	
City Carol Stream	State IL	Zip Code 60197	Amount of Each Disbursement this Period
Purpose of Disbursement (412)Telephone Expense		Category/ Type	55.16
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>	
Office Sought:		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53	
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		

Full Name (Last, First, Middle Initial)		Transaction ID: D2-02to0X	
<b>C. Cato Travel</b>		Date of Disbursement	
Mailing Address Senate Russell Bld, 1ST & C. St. NE		MM / DD / YYYY 02 / 12 / 2008	
City Washington	State DC	Zip Code 20510	Amount of Each Disbursement this Period
Purpose of Disbursement (412)Travel Fees		Category/ Type	100.00
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>	
Office Sought:		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53	
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		

SUBTOTAL of Disbursements This Page (optional) .....	1397.56
TOTAL This Period (last page this line number only) .....	118182.69

26020180815

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE**

C00128876

Full Name (Last, First, Middle Initial) <b>A. Hertz Rent-A-Car</b>		Transaction ID: D6-01Gw0T Date of Disbursement: 02 / 12 / 2008
Mailing Address 902 Tel Aviv Ave. City: Kansas City State: MO Zip Code: 64153		Amount of Each Disbursement this Period <b>134.52</b> <b>MEMO</b> <b>Credit Card Item</b> <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Purpose of Disbursement (412)Travel-Car Rental	Category/Type	
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Transaction ID: D8-01NG0U Date of Disbursement: 02 / 12 / 2008
Mailing Address 6700 B. Richmond Highway City: Alexandria State: VA Zip Code: 22306		Amount of Each Disbursement this Period <b>35.68</b> <b>MEMO</b> <b>Credit Card Item</b> <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Purpose of Disbursement (412)Office Supplies	Category/Type	
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Sofitel Hotels</b>		Transaction ID: D10-03YP01 Date of Disbursement: 02 / 12 / 2008
Mailing Address 5800 Blue Lagoon Drive City: Miami State: FL Zip Code: 33126		Amount of Each Disbursement this Period <b>327.97</b> <b>MEMO</b> <b>Credit Card Item</b> <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Purpose of Disbursement (412)Travel-Lodging	Category/Type	
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....▶

0.00

TOTAL This Period (last page this line number only) .....▶

118182.69

200801000010

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
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Full Name (Last, First, Middle Initial) <b>A. Usairways</b>		Transaction ID: D11-02LD04
Mailing Address		Date of Disbursement MM / DD / YYYY 02 / 12 / 2008
City <b>Phoenix</b>	State <b>AZ</b>	Amount of Each Disbursement this Period 456.50
Purpose of Disbursement <b>(412)Travel-Airline Tckts</b>	Category/Type	<b>MEMO</b>
Candidate Name		<b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		Transaction ID: D1388-02MM0g
Mailing Address		Date of Disbursement MM / DD / YYYY 02 / 12 / 2008
City <b>Ogden</b>	State <b>UT</b>	Amount of Each Disbursement this Period 715.56
Purpose of Disbursement <b>941 Payroll Tax Deposit</b>	Category/Type	
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Matrix</b>		Transaction ID: D1659-03JX04
Mailing Address <b>P. O. Box 742501</b>		Date of Disbursement MM / DD / YYYY 02 / 12 / 2008
City <b>Cincinnati</b>	State <b>OH</b>	Amount of Each Disbursement this Period 36.08
Purpose of Disbursement <b>Comm-Teleconferencing</b>	Category/Type	
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	751.64
TOTAL This Period (last page this line number only) .....	118934.33

28020180817

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
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Full Name (Last, First, Middle Initial) <b>A. McKellar Group Inc.</b>		Transaction ID: <b>D1681-036v0B</b>
Mailing Address <b>523 Grand Boulevard, Suite 1D</b>		Date of Disbursement MM / DD / YYYY <b>02 / 12 / 2008</b>
City <b>Kansas City</b>	State <b>MO</b>	Zip Code <b>64106</b>
Purpose of Disbursement <b>Fundrsng Consltng Jan '08</b>	Category/ Type	Amount of Each Disbursement this Period <b>4000.00</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For:	
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. McManus, Ashley J.</b>		Transaction ID: <b>D1712-038R0S</b>
Mailing Address <b>1832 SW Lincoln</b>		Date of Disbursement MM / DD / YYYY <b>02 / 12 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66604</b>
Purpose of Disbursement <b>Salary</b>	Category/ Type	Amount of Each Disbursement this Period <b>856.27</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For:	
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. Pro Print Incorporated</b>		Transaction ID: <b>D2181-01SE0I</b>
Mailing Address <b>2028 S. W. Gage Boulevard</b>		Date of Disbursement MM / DD / YYYY <b>02 / 12 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66604</b>
Purpose of Disbursement <b>Printing Expense</b>	Category/ Type	Amount of Each Disbursement this Period <b>2665.68</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For:	
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

SUBTOTAL of Disbursements This Page (optional) .....	<b>7521.95</b>
TOTAL This Period (last page this line number only) .....	<b>126456.28</b>

2008018001

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Rowden, Mary E.</b>		Transaction ID: D2426-032u0f
Mailing Address 3137 SW Randolph Ave., Apt 207		Date of Disbursement MM / DD / YYYY 02 / 12 / 2008
City Topeka	State KS	Zip Code 66611
Purpose of Disbursement Salary	Category/ Type	Amount of Each Disbursement this Period 1127.49
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. 116 Inc.</b>		Transaction ID: D3-03R602
Mailing Address "116 Club", 234 Third Street N. E.		Date of Disbursement MM / DD / YYYY 02 / 14 / 2008
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Luncheon-Food	Category/ Type	Amount of Each Disbursement this Period 59.20
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. Bellwether Consulting Group</b>		Transaction ID: D575-03YL02
Mailing Address 1111 19th Street, NW, Suite 1150		Date of Disbursement MM / DD / YYYY 02 / 14 / 2008
City Washington	State DC	Zip Code 20036
Purpose of Disbursement March-Fundrsng Consulting	Category/ Type	Amount of Each Disbursement this Period 5000.00
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

SUBTOTAL of Disbursements This Page (optional) .....	6186.69
TOTAL This Period (last page this line number only) .....	132642.97

28020180819

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full)

PAT ROBERTS FOR SENATE

C00128876

Full Name (Last, First, Middle Initial)

**A.** Cottrell, Jacqueline

Mailing Address

6212 Gentle Lane

City

Alexandria

State

VA

Zip Code

22310

Purpose of Disbursement

Reimb-Trvl - Cab Fares

Candidate Name

Category/  
Type

Office Sought:

Disbursement For:

Primary

General

Other (specify): ▼

State:

District:

Transaction ID: D929-01KP0d

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2008

MM / DD / YYYY  
14 / 14 / 2008

MM / DD / YYYY  
2008

Amount of Each Disbursement this Period

40.00

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Hsbc Business Solutions

Mailing Address

PO Box 5239

City

Carol Stream

State

IL

Zip Code

60197

Purpose of Disbursement

Office Supplies

Candidate Name

Category/  
Type

Office Sought:

Disbursement For:

Primary

General

Other (specify): ▼

State:

District:

Transaction ID: D1336-02yg0G

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2008

MM / DD / YYYY  
14 / 14 / 2008

MM / DD / YYYY  
2008

Amount of Each Disbursement this Period

320.35

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Sprint

Mailing Address

P. O. Box 1769

City

Newark

State

NJ

Zip Code

07101

Purpose of Disbursement

Telephone Expense

Candidate Name

Category/  
Type

Office Sought:

Disbursement For:

Primary

General

Other (specify): ▼

State:

District:

Transaction ID: D2611-03IK07

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2008

MM / DD / YYYY  
14 / 14 / 2008

MM / DD / YYYY  
2008

Amount of Each Disbursement this Period

126.64

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

486.99

TOTAL This Period (last page this line number only) .....

133129.96

28020180820

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. The Blackstone Group</b>		Transaction ID: D2711-03YI01
Mailing Address 345 Park Ave		Date of Disbursement MM/DD/YYYY 02/14/2008
City New York	State NY	Zip Code 10154
Purpose of Disbursement Room Rental, Meals		Amount of Each Disbursement this Period 1465.32
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Bank Of America</b>		Transaction ID: D449-02GY1v
Mailing Address PO Box 15731		Date of Disbursement MM/DD/YYYY 02/15/2008
City Wilmington	State DE	Zip Code 19886
Purpose of Disbursement (413)Jan 2008 Payment		Amount of Each Disbursement this Period 7798.39
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Al's Humble Flowers</b>		Transaction ID: D1-02GQ06
Mailing Address 2600 Central Ave.		Date of Disbursement MM/DD/YYYY 02/15/2008
City Dodge City	State KS	Zip Code 67801
Purpose of Disbursement (413)Flowers		Amount of Each Disbursement this Period 103.62
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b> <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional) .....	9263.71
TOTAL This Period (last page this line number only) .....	142393.67

28020180821

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)

Transaction ID: D2-02GY1w  
Date of Disbursement

**A. Bank Of America**

Mailing Address  
PO Box 15731

M M M 02	/	D D D 15	/	Y Y Y Y Y Y Y Y 2008
-------------	---	-------------	---	-------------------------

City State Zip Code  
Wilmington DE 19886

Amount of Each Disbursement this Period

30.00
-------

Purpose of Disbursement  
(413)Annual Mem. Fee

MEMO
------

Candidate Name

Category/  
Type

**MEMO  
Credit Card Item**

Office Sought: State: District:

Disbursement For:  
 Primary  General  
 Other (specify): ▼

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

Transaction ID: D5-02FI0c  
Date of Disbursement

**B. Capitol Plaza Hotel**

Mailing Address  
1717 SW Topeka Blvd

M M M 02	/	D D D 15	/	Y Y Y Y Y Y Y Y 2008
-------------	---	-------------	---	-------------------------

City State Zip Code  
Topeka KS 66612

Amount of Each Disbursement this Period

296.13
--------

Purpose of Disbursement  
(413)Lodging-KS Day

MEMO
------

Candidate Name

Category/  
Type

**MEMO  
Credit Card Item**

Office Sought: State: District:

Disbursement For:  
 Primary  General  
 Other (specify): ▼

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

Transaction ID: D6-02FI0d  
Date of Disbursement

**C. Capitol Plaza Hotel**

Mailing Address  
1717 SW Topeka Blvd

M M M 02	/	D D D 15	/	Y Y Y Y Y Y Y Y 2008
-------------	---	-------------	---	-------------------------

City State Zip Code  
Topeka KS 66612

Amount of Each Disbursement this Period

540.96
--------

Purpose of Disbursement  
(413)Travel-Lodging

MEMO
------

Candidate Name

Category/  
Type

**MEMO  
Credit Card Item**

Office Sought: State: District:

Disbursement For:  
 Primary  General  
 Other (specify): ▼

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....▶

0.00
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TOTAL This Period (last page this line number only) .....▶

142393.67
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20020180822

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)

Transaction ID: D9-01Du1k  
Date of Disbursement

**A. Fedex**

Mailing Address  
PO Box 1140

M M / D D / Y Y Y Y
02 / 15 / 2008

City State Zip Code  
Memphis TN 38101

Amount of Each Disbursement this Period

43.17
-------

Purpose of Disbursement  
(413)Shipping Expenses

Category/ Type
-------------------

**MEMO**

**Credit Card Item**

Candidate Name

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Office Sought:

Disbursement For:

Primary  General  
 Other (specify): ▼

State: District:

Full Name (Last, First, Middle Initial)

Transaction ID: D10-03IP0B  
Date of Disbursement

**B. Fedex Kinko's #0180**

Mailing Address  
805 S. Kansas Ave.

M M / D D / Y Y Y Y
02 / 15 / 2008

City State Zip Code  
Topeka KS 66612

Amount of Each Disbursement this Period

10.59
-------

Purpose of Disbursement  
(413)Office Supplies

Category/ Type
-------------------

**MEMO**

**Credit Card Item**

Candidate Name

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Office Sought:

Disbursement For:

Primary  General  
 Other (specify): ▼

State: District:

Full Name (Last, First, Middle Initial)

Transaction ID: D11-03IPOC  
Date of Disbursement

**C. Fedex Kinko's #0180**

Mailing Address  
805 S. Kansas Ave.

M M / D D / Y Y Y Y
02 / 15 / 2008

City State Zip Code  
Topeka KS 66612

Amount of Each Disbursement this Period

51.05
-------

Purpose of Disbursement  
(413)Printing-Press Packe

Category/ Type
-------------------

**MEMO**

**Credit Card Item**

Candidate Name

Refund or Disposal of Excessive  
Contributions Required under  
11 C.F.R. 400.53

Office Sought:

Disbursement For:

Primary  General  
 Other (specify): ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) .....▶

0.00
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TOTAL This Period (last page this line number only) .....▶

142393.67
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28020180823



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full)  
**PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial)  
**A. Lawrence Journal-World**

Mailing Address

City: **Lawrence** State: **KS** Zip Code

Purpose of Disbursement  
(413)Newspaper Ad

Candidate Name

Office Sought: State: District:

Disbursement For:  
 Primary  General  
 Other (specify): ▼

Transaction ID: **D19-03Yz01**  
Date of Disbursement: **02 / 15 / 2008**

Amount of Each Disbursement this Period  
**648.60**

**MEMO**  
**Credit Card Item**  
 Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**B. Metro Wash Airport**

Mailing Address  
**Parkins Operations Garage A.**

City: **Washington** State: **DC** Zip Code: **20001**

Purpose of Disbursement  
(413)Travel-Parking Fees

Candidate Name

Office Sought: State: District:

Disbursement For:  
 Primary  General  
 Other (specify): ▼

Transaction ID: **D21-02FP08**  
Date of Disbursement: **02 / 15 / 2008**

Amount of Each Disbursement this Period  
**68.00**

**MEMO**  
**Credit Card Item**  
 Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**C. Midwest Express Airline**

Mailing Address  
**6744 S. Howell Ave.**

City: **Oak Creek** State: **WI** Zip Code: **53154**

Purpose of Disbursement  
(413)Travel-Meal

Candidate Name

Office Sought: State: District:

Disbursement For:  
 Primary  General  
 Other (specify): ▼

Transaction ID: **D23-01dn0a**  
Date of Disbursement: **02 / 15 / 2008**

Amount of Each Disbursement this Period  
**11.00**

**MEMO**  
**Credit Card Item**  
 Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....▶

TOTAL This Period (last page this line number only) .....▶

**0.00**

**142393.67**

280201808215

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17     18     19a  
 20a     20b     20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. Monocle On Capitol Hill</b>		Transaction ID: D24-02Fm0j Date of Disbursement: 02 / 15 / 2008	
Mailing Address 107 D. St. NE		Amount of Each Disbursement this Period 134.34	
City Washington	State DC	Zip Code 20002	MEMO Credit Card Item
Purpose of Disbursement (413)Meal-New Intern		Category/ Type	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53	
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. National Car Rental</b>		Transaction ID: D25-02E803 Date of Disbursement: 02 / 15 / 2008	
Mailing Address Kci Airport		Amount of Each Disbursement this Period 298.80	
City Kansas City	State MO	Zip Code	MEMO Credit Card Item
Purpose of Disbursement (413)Travel-Car Rental		Category/ Type	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53	
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. Ottawa Herald</b>		Transaction ID: D26-03Yy01 Date of Disbursement: 02 / 15 / 2008	
Mailing Address		Amount of Each Disbursement this Period 418.24	
City Ottawa	State KS	Zip Code	MEMO Credit Card Item
Purpose of Disbursement (413)Newspaper Ad		Category/ Type	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53	
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		
State:	District:		

SUBTOTAL of Disbursements This Page (optional) .....	0.00
TOTAL This Period (last page this line number only) .....	142393.67

28020180820

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Postmaster</b>		Transaction ID: <b>D28-02Jr1K</b> Date of Disbursement: <b>MEM / DD / YYYY</b> <b>02 / 15 / 2008</b>
Mailing Address <b>Topeka Main PO</b>		Amount of Each Disbursement this Period <b>826.74</b> <b>MEMO</b> <b>Credit Card Item</b>
City <b>Topeka</b>	State <b>KS</b>	
Zip Code <b>66603</b>		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Purpose of Disbursement <b>(413)Postage</b>		
Candidate Name		Category/Type
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Rosa's Mexican Restaurant</b>		Transaction ID: <b>D31-03Yp01</b> Date of Disbursement: <b>MEM / DD / YYYY</b> <b>02 / 15 / 2008</b>
Mailing Address <b>2025 SE California Ave.</b>		Amount of Each Disbursement this Period <b>271.38</b> <b>MEMO</b> <b>Credit Card Item</b>
City <b>Topeka</b>	State <b>KS</b>	
Zip Code <b>66607</b>		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Purpose of Disbursement <b>(413)Staff Lunch-KS Day</b>		
Candidate Name		Category/Type
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Sprint #906</b>		Transaction ID: <b>D32-032G05</b> Date of Disbursement: <b>MEM / DD / YYYY</b> <b>02 / 15 / 2008</b>
Mailing Address <b>2130 SW Wanamaker Rd., Ste 122</b>		Amount of Each Disbursement this Period <b>1074.48</b> <b>MEMO</b> <b>Credit Card Item</b>
City <b>Topeka</b>	State <b>KS</b>	
Zip Code		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Purpose of Disbursement <b>(413)Equipmnt-Blackberrys</b>		
Candidate Name		Category/Type
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional) .....	<b>0.00</b>
TOTAL This Period (last page this line number only) .....	<b>142393.67</b>

28020180827

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. Topeka Capital Journal</b>		Transaction ID: D34-03Rq02 Date of Disbursement
Mailing Address 616 SE Jefferson St.		<input type="checkbox"/> M / <input type="checkbox"/> D / <input type="checkbox"/> Y 02 / 15 / 2008
City Topeka	State KS	Zip Code 66600
Purpose of Disbursement (413)Newspaper Ad	<input type="checkbox"/> Category/ Type	Amount of Each Disbursement this Period 1342.31
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. USAirways</b>		Transaction ID: D35-03Z001 Date of Disbursement
Mailing Address		<input type="checkbox"/> M / <input type="checkbox"/> D / <input type="checkbox"/> Y 02 / 15 / 2008
City San Antonio	State TX	Zip Code
Purpose of Disbursement (413)Travel-Tickets	<input type="checkbox"/> Category/ Type	Amount of Each Disbursement this Period 271.00
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Walmart Stores Inc.</b>		Transaction ID: D37-02wb03 Date of Disbursement
Mailing Address #0484		<input type="checkbox"/> M / <input type="checkbox"/> D / <input type="checkbox"/> Y 02 / 15 / 2008
City Lawrence	State KS	Zip Code
Purpose of Disbursement (413)Supplies-1/27 Event	<input type="checkbox"/> Category/ Type	Amount of Each Disbursement this Period 40.74
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	142393.67

28020180828

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. New Media Communications</b>		Transaction ID: D1874-031R0R Date of Disbursement
Mailing Address 3046 Brecksville Road		<input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
City Richfield	State OH	Zip Code 44286
Purpose of Disbursement Credit Card Fees-Jan 08	<input type="text" value=""/>	Amount of Each Disbursement this Period <input type="text" value="1.00"/>
Candidate Name	Category/ Type	
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify): ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Linweld</b>		Transaction ID: D1633-01NQ0V Date of Disbursement
Mailing Address Box 1858		<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
City Topeka	State KS	Zip Code 66601
Purpose of Disbursement Advertising-Helium	<input type="text" value=""/>	Amount of Each Disbursement this Period <input type="text" value="48.82"/>
Candidate Name	Category/ Type	
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify): ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Sprint</b>		Transaction ID: D2604-031Z0B Date of Disbursement
Mailing Address PO Box 660092		<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
City Dallas	State TX	Zip Code 75266
Purpose of Disbursement Telephone Expense	<input type="text" value=""/>	Amount of Each Disbursement this Period <input type="text" value="312.53"/>
Candidate Name	Category/ Type	
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify): ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	<input type="text" value="362.35"/>
TOTAL This Period (last page this line number only) .....	<input type="text" value="142756.02"/>

28020180829



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

17  
20a     18  
20b     19a  
20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

**A. Rowden, Mary E.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 3137 SW Randolph Ave., Apt 207  
 City: Topeka      State: KS      Zip Code: 66611  
 Purpose of Disbursement: Salary  
 Candidate Name: \_\_\_\_\_  
 Office Sought: \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Disbursement For:  Primary     General  
 Other (specify): ▼  
 Transaction ID: D2427-032u0g  
 Date of Disbursement: 02 / 26 / 2008  
 Amount of Each Disbursement this Period: 1127.49  
 Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**B. New Media Communications**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 3046 Brecksville Road  
 City: Richfield      State: OH      Zip Code: 44286  
 Purpose of Disbursement: Create a Video  
 Candidate Name: \_\_\_\_\_  
 Office Sought: \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Disbursement For:  Primary     General  
 Other (specify): ▼  
 Transaction ID: D1872-031R0P  
 Date of Disbursement: 02 / 28 / 2008  
 Amount of Each Disbursement this Period: 3308.00  
 Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**C. Rowden, Mary E.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 3137 SW Randolph Ave., Apt 207  
 City: Topeka      State: KS      Zip Code: 66611  
 Purpose of Disbursement: Reimb-Mileage  
 Candidate Name: \_\_\_\_\_  
 Office Sought: \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Disbursement For:  Primary     General  
 Other (specify): ▼  
 Transaction ID: D2429-032u0i  
 Date of Disbursement: 02 / 28 / 2008  
 Amount of Each Disbursement this Period: 54.04  
 Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... 4489.53  
 TOTAL This Period (last page this line number only) ..... 148905.48

28020180831



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Roberts, Franki</b>		Transaction ID: <b>D2352-01Em1D</b>
Mailing Address <b>2203 White Oakes Drive</b>		Date of Disbursement MM / DD / YYYY <b>02 / 29 / 2008</b>
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22306</b>
Purpose of Disbursement <b>Reimb-Travel-Cabs,Tips</b>	<input type="checkbox"/> Category/ Type	Amount of Each Disbursement this Period <b>29.30</b>
Candidate Name	Office Sought: State: District:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Transaction ID: <b>D3050-02Mn1N</b>
Mailing Address <b>P. O. Box 660108</b>		Date of Disbursement MM / DD / YYYY <b>02 / 29 / 2008</b>
City <b>Dallas</b>	State <b>TX</b>	Zip Code <b>75266</b>
Purpose of Disbursement <b>Telephone Expense</b>	<input type="checkbox"/> Category/ Type	Amount of Each Disbursement this Period <b>299.77</b>
Candidate Name	Office Sought: State: District:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		

Full Name (Last, First, Middle Initial) <b>C. Towns, Leroy</b>		Transaction ID: <b>D2876-01111f</b>
Mailing Address <b>102 Barnhill Place</b>		Date of Disbursement MM / DD / YYYY <b>03 / 01 / 2008</b>
City <b>Chapel Hill</b>	State <b>NC</b>	Zip Code <b>27514</b>
Purpose of Disbursement <b>Fundrsng Consltng Mar 08</b>	<input type="checkbox"/> Category/ Type	Amount of Each Disbursement this Period <b>1700.00</b>
Candidate Name	Office Sought: State: District:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		

SUBTOTAL of Disbursements This Page (optional) .....	<b>2029.07</b>
TOTAL This Period (last page this line number only) .....	<b>152818.74</b>

28020180833



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. Cox Communications,</b>		Transaction ID: <b>D940-03IG08</b>
Mailing Address <b>P. O. Box 22142</b>		Date of Disbursement <b>03 / 04 / 2008</b>
City <b>Tulsa</b>	State <b>OK</b>	Amount of Each Disbursement this Period <b>231.12</b>
Zip Code <b>74121</b>		
Purpose of Disbursement <b>Communication Internet</b>		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Highwood Capital, LLC</b>		Transaction ID: <b>D1280-03Y102</b>
Mailing Address <b>915 E Street, NW, #613</b>		Date of Disbursement <b>03 / 04 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Amount of Each Disbursement this Period <b>5000.00</b>
Zip Code <b>20004</b>		
Purpose of Disbursement <b>Mar Fundrng Consulting</b>		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Kansas Republican Party</b>		Transaction ID: <b>D1511-02z505</b>
Mailing Address <b>2025 SW Gage Blvd</b>		Date of Disbursement <b>03 / 04 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Amount of Each Disbursement this Period <b>1000.00</b>
Zip Code <b>66604</b>		
Purpose of Disbursement <b>Membership-Party Grnd Clb</b>		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6231.12</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>174245.67</b>

20020180835

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Linweld</b>		Transaction ID: D1634-01NQ0W
Mailing Address Box 1858		Date of Disbursement MM / DD / YYYY 03 / 04 / 2008
City Topeka	State KS	Zip Code 66601
Purpose of Disbursement Advertising-Helium	Category/ Type	Amount of Each Disbursement this Period 16.28
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wolfe's Camera Shops Inc.</b>		Transaction ID: D3225-02EM0n
Mailing Address 635 Kansas Ave., P. O. Box 1437		Date of Disbursement MM / DD / YYYY 03 / 04 / 2008
City Topeka	State KS	Zip Code 66601
Purpose of Disbursement Photography Expense	Category/ Type	Amount of Each Disbursement this Period 21.31
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Bernadette Print Group</b>		Transaction ID: D578-03Zf01
Mailing Address 8950 Pershall Rd		Date of Disbursement MM / DD / YYYY 03 / 05 / 2008
City Hazelwood	State MO	Zip Code 63042
Purpose of Disbursement Postage for mailing	Category/ Type	Amount of Each Disbursement this Period 3443.00
Candidate Name		
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	3480.59
TOTAL This Period (last page this line number only) .....	177726.26

28020180836

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Bockers II Catering</b>		Transaction ID: <b>D609-03Zh01</b>
Mailing Address <b>P.O. Box 849</b>		Date of Disbursement <b>03 / 05 / 2008</b>
City <b>Manhattan</b>	State <b>KS</b>	Zip Code <b>66505</b>
Purpose of Disbursement <b>Catering-Event on 2/22/08</b>		Amount of Each Disbursement this Period <b>1061.72</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Marthabelle's Print Shoppe, Inc.</b>		Transaction ID: <b>D1653-03Zg01</b>
Mailing Address <b>P.O. Box 30444</b>		Date of Disbursement <b>03 / 05 / 2008</b>
City <b>Kansas City</b>	State <b>MO</b>	Zip Code <b>64112</b>
Purpose of Disbursement <b>Printing-Invitations</b>		Amount of Each Disbursement this Period <b>5281.76</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. McKellar Group Inc.</b>		Transaction ID: <b>D1682-036v0C</b>
Mailing Address <b>523 Grand Boulevard, Suite 1D</b>		Date of Disbursement <b>03 / 05 / 2008</b>
City <b>Kansas City</b>	State <b>MO</b>	Zip Code <b>64106</b>
Purpose of Disbursement <b>Reimb-Postage Flotus</b>		Amount of Each Disbursement this Period <b>1617.74</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7961.22</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>185687.48</b>

280201808M

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. McManus, Ashley J.</b>		Transaction ID: <b>D1715-038R0V</b>	
Mailing Address <b>1832 SW Lincoln</b>		Date of Disbursement MM / DD / YYYY <b>03 / 05 / 2008</b>	
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66604</b>	Amount of Each Disbursement this Period <b>65.65</b>
Purpose of Disbursement <b>Travel-Reimb Mileage</b>		Category/ Type	
Candidate Name			
Office Sought:	State:      District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53			

Full Name (Last, First, Middle Initial) <b>B. McManus, Ashley J.</b>		Transaction ID: <b>D1716-038R0W</b>	
Mailing Address <b>1832 SW Lincoln</b>		Date of Disbursement MM / DD / YYYY <b>03 / 05 / 2008</b>	
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66604</b>	Amount of Each Disbursement this Period <b>75.75</b>
Purpose of Disbursement <b>Travel-Reimb Mileage</b>		Category/ Type	
Candidate Name			
Office Sought:	State:      District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53			

Full Name (Last, First, Middle Initial) <b>C. Rowden, Mary E.</b>		Transaction ID: <b>D2430-032u0j</b>	
Mailing Address <b>3137 SW Randolph Ave., Apt 207</b>		Date of Disbursement MM / DD / YYYY <b>03 / 05 / 2008</b>	
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66611</b>	Amount of Each Disbursement this Period <b>171.20</b>
Purpose of Disbursement <b>Travel-Mileage Exp</b>		Category/ Type	
Candidate Name			
Office Sought:	State:      District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>312.60</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>186000.08</b>

28020180833

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. Rowden, Mary E.</b>		Transaction ID: D2431-032u0k Date of Disbursement	
Mailing Address 3137 SW Randolph Ave., Apt 207		MM / DD / YYYY 03 / 05 / 2008	
City	State	Zip Code	Amount of Each Disbursement this Period <b>139.38</b>
Topeka	KS	66611	
Purpose of Disbursement Travel-Reimb Mileage		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name			
Office Sought:	Disbursement For:		
State:      District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		

Full Name (Last, First, Middle Initial) <b>B. Topeka Country Club</b>		Transaction ID: D2811-02Gn0W Date of Disbursement	
Mailing Address 2700 SW Buchanan		MM / DD / YYYY 03 / 05 / 2008	
City	State	Zip Code	Amount of Each Disbursement this Period <b>188.45</b>
Topeka	KS	66611	
Purpose of Disbursement Meeting/Meal Expense		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name			
Office Sought:	Disbursement For:		
State:      District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		

Full Name (Last, First, Middle Initial) <b>C. Bank Of America</b>		Transaction ID: D564-02wI0n Date of Disbursement	
Mailing Address P. O. Box 37271		MM / DD / YYYY 03 / 07 / 2008	
City	State	Zip Code	Amount of Each Disbursement this Period <b>1421.72</b>
Baltimore	MD	21297	
Purpose of Disbursement (414)Feb 2008 Payment		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name			
Office Sought:	Disbursement For:		
State:      District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼		

SUBTOTAL of Disbursements This Page (optional) .....	<b>1749.55</b>
TOTAL This Period (last page this line number only) .....	<b>187749.63</b>

28020180839

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Transaction ID: <b>D1-02r309</b>
Mailing Address		Date of Disbursement MM / DD / YYYY <b>03 / 07 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Amount of Each Disbursement this Period <b>395.00</b>
Purpose of Disbursement <b>(414)Travel-Airline Tkts</b>	Category/ Type	<b>MEMO</b>
Candidate Name		<b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Plaza Hotel</b>		Transaction ID: <b>D2-02F10e</b>
Mailing Address <b>1717 SW Topeka Blvd</b>		Date of Disbursement MM / DD / YYYY <b>03 / 07 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Amount of Each Disbursement this Period <b>595.04</b>
Purpose of Disbursement <b>(414)Travel-Lodging</b>	Category/ Type	<b>MEMO</b>
Candidate Name		<b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Cato Travel</b>		Transaction ID: <b>D3-02to0Y</b>
Mailing Address <b>Senate Russell Bld, 1ST &amp; C. St. NE</b>		Date of Disbursement MM / DD / YYYY <b>03 / 07 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Amount of Each Disbursement this Period <b>50.00</b>
Purpose of Disbursement <b>(414)Travel -Fees</b>	Category/ Type	<b>MEMO</b>
Candidate Name		<b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	<b>0.00</b>
TOTAL This Period (last page this line number only) .....	<b>187749.63</b>

28020180840

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. Hertz Rent-A-Car</b>		Transaction ID: <b>D5-01Gw0U</b> Date of Disbursement
Mailing Address <b>902 Tel Aviv Ave.</b>		<b>MM</b> / <b>DD</b> / <b>YYYY</b> <b>03</b> / <b>07</b> / <b>2008</b>
City	State	Zip Code
<b>Kansas City</b>	<b>MO</b>	<b>64153</b>
Purpose of Disbursement <b>(414)Travel-Car Rental Fe</b>		Amount of Each Disbursement this Period <b>10.02</b>
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:      District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. Hertz Rent-A-Car</b>		Transaction ID: <b>D6-01Gw0V</b> Date of Disbursement
Mailing Address <b>902 Tel Aviv Ave.</b>		<b>MM</b> / <b>DD</b> / <b>YYYY</b> <b>03</b> / <b>07</b> / <b>2008</b>
City	State	Zip Code
<b>Kansas City</b>	<b>MO</b>	<b>64153</b>
Purpose of Disbursement <b>(414)Travel-Car Rental</b>		Amount of Each Disbursement this Period <b>251.23</b>
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:      District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. Midwest Express Airline</b>		Transaction ID: <b>D9-01dn0b</b> Date of Disbursement
Mailing Address <b>6744 S. Howell Ave.</b>		<b>MM</b> / <b>DD</b> / <b>YYYY</b> <b>03</b> / <b>07</b> / <b>2008</b>
City	State	Zip Code
<b>Oak Creek</b>	<b>WI</b>	<b>53154</b>
Purpose of Disbursement <b>(414)Travel-Meal</b>		Amount of Each Disbursement this Period <b>11.00</b>
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:      District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>187749.63</b>

20020180841



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

**A. Bernadette Print Group**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
8950 Pershall Rd

City State Zip Code  
Hazelwood MO 63042

Purpose of Disbursement  
Postage For Mailing

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_

Disbursement For:  
 Primary  General  
 Other (specify): ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID: D579-03Zf02  
Date of Disbursement: 03 / 10 / 2008

Amount of Each Disbursement this Period: 4057.00

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**B. McKellar Group Inc.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
523 Grand Boulevard, Suite 1D

City State Zip Code  
Kansas City MO 64106

Purpose of Disbursement  
Reimb-Supplies

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_

Disbursement For:  
 Primary  General  
 Other (specify): ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID: D1684-036v0E  
Date of Disbursement: 03 / 10 / 2008

Amount of Each Disbursement this Period: 58.50

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**C. Wilson Grand Communications Inc.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
429 N. Saint Asaph Street

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement  
Fundrsng Consultng March

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_

Disbursement For:  
 Primary  General  
 Other (specify): ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID: D3136-01Ej15  
Date of Disbursement: 03 / 10 / 2008

Amount of Each Disbursement this Period: 5000.00

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... 9115.50

TOTAL This Period (last page this line number only) ..... 230892.63

28020180843

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. At&amp;T</b>		Transaction ID: <b>D316-02zd0L</b>
Mailing Address <b>P. O. Box 630047</b>		Date of Disbursement <b>03 / 11 / 2008</b>
City <b>Dallas</b>	State <b>TX</b>	Zip Code <b>75263</b>
Purpose of Disbursement <b>Telephone</b>	Category/ Type	Amount of Each Disbursement this Period <b>372.80</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State:      District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. Bellwether Consulting Group</b>		Transaction ID: <b>D576-03YL03</b>
Mailing Address <b>1111 19th Street, NW, Suite 1150</b>		Date of Disbursement <b>03 / 11 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20036</b>
Purpose of Disbursement <b>2/6 Monocle Meeting</b>	Category/ Type	Amount of Each Disbursement this Period <b>34.39</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State:      District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. Integrated Campaign Solutions, LLC</b>		Transaction ID: <b>D1348-03a301</b>
Mailing Address <b>C/O: David Gershanik, 526 Daroco Avenue</b>		Date of Disbursement <b>03 / 11 / 2008</b>
City <b>Coral Gables</b>	State <b>FL</b>	Zip Code <b>33146</b>
Purpose of Disbursement <b>Fundrsng Consulting&amp;Trvl</b>	Category/ Type	Amount of Each Disbursement this Period <b>4158.98</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State:      District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

SUBTOTAL of Disbursements This Page (optional) .....	<b>4566.17</b>
TOTAL This Period (last page this line number only) .....	<b>235458.80</b>

28020130344

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		Transaction ID: D1390-02MM0i Date of Disbursement
Mailing Address		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
City <b>Ogden</b>	State <b>UT</b>	Zip Code <b>84201</b>
Purpose of Disbursement <b>941 Payroll Tax Deposit</b>		Amount of Each Disbursement this Period <input type="text" value="715.58"/>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Matrix</b>		Transaction ID: D1660-03JX05 Date of Disbursement
Mailing Address <b>P. O. Box 742501</b>		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
City <b>Cincinnati</b>	State <b>OH</b>	Zip Code <b>45274</b>
Purpose of Disbursement <b>Comm-Teleconferencing</b>		Amount of Each Disbursement this Period <input type="text" value="195.63"/>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. McManus, Ashley J.</b>		Transaction ID: D1714-038R0U Date of Disbursement
Mailing Address <b>1832 SW Lincoln</b>		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66604</b>
Purpose of Disbursement <b>Salary</b>		Amount of Each Disbursement this Period <input type="text" value="856.26"/>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	Category/ Type

SUBTOTAL of Disbursements This Page (optional) .....	<input type="text" value="1767.47"/>
TOTAL This Period (last page this line number only) .....	<input type="text" value="237226.27"/>

23020180845

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. Postmaster-Great Bend</b>		Transaction ID: D2044-01771R Date of Disbursement
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
Great Bend	KS	67530
Purpose of Disbursement Postage Expense		Amount of Each Disbursement this Period
Candidate Name		<input type="text"/> 41.00
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:      District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. Rowden, Mary E.</b>		Transaction ID: D2428-032u0h Date of Disbursement
Mailing Address 3137 SW Randolph Ave., Apt 207		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
Topeka	KS	66611
Purpose of Disbursement Salary		Amount of Each Disbursement this Period
Candidate Name		<input type="text"/> 1127.49
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:      District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. At&amp;T Mobility</b>		Transaction ID: D357-031F0G Date of Disbursement
Mailing Address P. O. Box 650553		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
Dallas	TX	
Purpose of Disbursement Telephone Expense		Amount of Each Disbursement this Period
Candidate Name		<input type="text"/> 61.60
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:      District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

SUBTOTAL of Disbursements This Page (optional) .....	<input type="text"/> 1230.09
TOTAL This Period (last page this line number only) .....	<input type="text"/> 238456.36

28020180846

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. At&amp;T Mobility</b>		Transaction ID: <b>D358-031F0H</b>
Mailing Address <b>P. O. Box 650553</b>		Date of Disbursement MM / DD / YYYY <b>03 / 14 / 2008</b>
City <b>Dallas</b>	State <b>TX</b>	Amount of Each Disbursement this Period <b>164.49</b>
Purpose of Disbursement <b>Telephone Expense</b>	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name		
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. Creative Catering &amp; Cafe</b>		Transaction ID: <b>D941-03a501</b>
Mailing Address <b>3238 E Douglas</b>		Date of Disbursement MM / DD / YYYY <b>03 / 14 / 2008</b>
City <b>Wichita</b>	State <b>KS</b>	Amount of Each Disbursement this Period <b>872.72</b>
Purpose of Disbursement <b>Catering-Food</b>	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name		
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. Creative Catering &amp; Cafe</b>		Transaction ID: <b>D942-03a502</b>
Mailing Address <b>3238 E Douglas</b>		Date of Disbursement MM / DD / YYYY <b>03 / 14 / 2008</b>
City <b>Wichita</b>	State <b>KS</b>	Amount of Each Disbursement this Period <b>71.19</b>
Purpose of Disbursement <b>Catering</b>	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name		
Office Sought: State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

SUBTOTAL of Disbursements This Page (optional) .....	<b>1108.40</b>
TOTAL This Period (last page this line number only) .....	<b>239564.76</b>

28020180847

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Hsbc Business Solutions</b>		Transaction ID: <b>D1337-02yg0H</b>
Mailing Address <b>PO Box 5239</b>		Date of Disbursement MM / DD / YYYY <b>03 / 14 / 2008</b>
City <b>Carol Stream</b>	State <b>IL</b>	Zip Code <b>60197</b>
Purpose of Disbursement <b>Office Supplies</b>	Category/ Type	Amount of Each Disbursement this Period <b>53.23</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For:	
State: <input type="checkbox"/> District: <input type="checkbox"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		Transaction ID: <b>D1392-02MM0K</b>
Mailing Address		Date of Disbursement MM / DD / YYYY <b>03 / 14 / 2008</b>
City <b>Ogden</b>	State <b>UT</b>	Zip Code <b>84201</b>
Purpose of Disbursement <b>1120 Pol Corp Inc Taxes</b>	Category/ Type	Amount of Each Disbursement this Period <b>8176.00</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For:	
State: <input type="checkbox"/> District: <input type="checkbox"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. Kansas Income Tax</b>		Transaction ID: <b>D1499-012z0N</b>
Mailing Address <b>Kansas Department Of Revenue, 915 SW Harrison Revenue</b>		Date of Disbursement MM / DD / YYYY <b>03 / 14 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Zip Code <b>66625</b>
Purpose of Disbursement <b>2007 Taxes</b>	Category/ Type	Amount of Each Disbursement this Period <b>1652.00</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For:	
State: <input type="checkbox"/> District: <input type="checkbox"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

SUBTOTAL of Disbursements This Page (optional) .....	<b>9881.23</b>
TOTAL This Period (last page this line number only) .....	<b>249445.99</b>

28020180848

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. New Media Communications</b>		Transaction ID: <b>D1875-031R0T</b>
Mailing Address <b>3046 Brecksville Road</b>		Date of Disbursement MM / DD / YYYY <b>03 / 17 / 2008</b>
City <b>Richfield</b>	State <b>OH</b>	Zip Code <b>44286</b>
Purpose of Disbursement <b>Credit Card Fees-Feb 08</b>		Amount of Each Disbursement this Period <b>181.27</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Reflections Photography, Inc.</b>		Transaction ID: <b>D2283-03ah01</b>
Mailing Address <b>631 Pennsylvania Ave. SE</b>		Date of Disbursement MM / DD / YYYY <b>03 / 20 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20003</b>
Purpose of Disbursement <b>Photography Expense</b>		Amount of Each Disbursement this Period <b>881.25</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Sheraton Overland Park</b>		Transaction ID: <b>D2573-02zb09</b>
Mailing Address <b>6100 College Boulevard</b>		Date of Disbursement MM / DD / YYYY <b>03 / 20 / 2008</b>
City <b>Overland Park</b>	State <b>KS</b>	Zip Code <b>66211</b>
Purpose of Disbursement <b>Luncheon with Laura Bush</b>		Amount of Each Disbursement this Period <b>11930.66</b>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>12993.18</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>262439.17</b>

20080320

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

**A. Internal Revenue Service**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City **Ogden**      State **UT**      Zip Code **84201**

Purpose of Disbursement: **941 Payroll Tax Deposit**

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_      Disbursement For:  Primary     General  
 Other (specify): ▼

State: \_\_\_\_\_      District: \_\_\_\_\_

Transaction ID: **D1391-02MM0j**  
Date of Disbursement: **03 / 25 / 2008**

Amount of Each Disbursement this Period: **715.54**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**B. McManus, Ashley J.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Mailing Address **1832 SW Lincoln**  
City **Topeka**      State **KS**      Zip Code **66604**

Purpose of Disbursement: **Salary**

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_      Disbursement For:  Primary     General  
 Other (specify): ▼

State: \_\_\_\_\_      District: \_\_\_\_\_

Transaction ID: **D1717-038R0X**  
Date of Disbursement: **03 / 25 / 2008**

Amount of Each Disbursement this Period: **856.27**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**C. Rowden, Mary E.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Mailing Address **3137 SW Randolph Ave., Apt 207**  
City **Topeka**      State **KS**      Zip Code **66611**

Purpose of Disbursement: **Salary**

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_      Disbursement For:  Primary     General  
 Other (specify): ▼

State: \_\_\_\_\_      District: \_\_\_\_\_

Transaction ID: **D2432-032u0l**  
Date of Disbursement: **03 / 25 / 2008**

Amount of Each Disbursement this Period: **1127.50**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... **2699.31**

**TOTAL** This Period (last page this line number only) ..... **265138.48**

26020130850

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. Barley's Brewhaus</b>		Transaction ID: <b>D2-02xC02</b>
Mailing Address <b>11924 W. 119TH</b>		Date of Disbursement MM / DD / YYYY <b>01 / 02 / 2008</b>
City <b>Overland Park</b>	State <b>KS</b>	Zip Code
Purpose of Disbursement <b>(409)Travel-Meals</b>	Category/ Type	Amount of Each Disbursement this Period <b>114.85</b>
Candidate Name		<b>MEMO</b>
Office Sought:	Disbursement For:	<b>Credit Card Item</b>
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>B. Hmshost</b>		Transaction ID: <b>D8-02vY06</b>
Mailing Address <b>Home Turf, Kansas City Airport</b>		Date of Disbursement MM / DD / YYYY <b>01 / 02 / 2008</b>
City <b>Kansas City</b>	State <b>MO</b>	Zip Code
Purpose of Disbursement <b>(409)Travel-Meal</b>	Category/ Type	Amount of Each Disbursement this Period <b>16.85</b>
Candidate Name		<b>MEMO</b>
Office Sought:	Disbursement For:	<b>Credit Card Item</b>
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>C. Hospital Gift Shop</b>		Transaction ID: <b>D9-03Vs01</b>
Mailing Address		Date of Disbursement MM / DD / YYYY <b>01 / 02 / 2008</b>
City <b>Wichita</b>	State <b>KS</b>	Zip Code
Purpose of Disbursement <b>(409)Flowers</b>	Category/ Type	Amount of Each Disbursement this Period <b>39.69</b>
Candidate Name		<b>MEMO</b>
Office Sought:	Disbursement For:	<b>Credit Card Item</b>
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....	<b>0</b>
TOTAL This Period (last page this line number only) .....	<b>0</b>

150020180351

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
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Full Name (Last, First, Middle Initial) <b>A. My Capture Inc.</b>		Transaction ID: D14-03Vr01 Date of Disbursement
Mailing Address <b>WEB Site</b>		<input type="checkbox"/> 01 / <input type="checkbox"/> 02 / <input type="checkbox"/> 2008
City State Zip Code <b>MO</b>		Amount of Each Disbursement this Period <b>23.05</b>
Purpose of Disbursement <b>(409)Event Photography</b>	Category/Type	<b>MEMO</b>
Candidate Name		<b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Pullman Place</b>		Transaction ID: D18-03Vq01 Date of Disbursement
Mailing Address <b>230 Cherokee</b>		<input type="checkbox"/> 01 / <input type="checkbox"/> 02 / <input type="checkbox"/> 2008
City State Zip Code <b>Leavenworth KS 66048</b>		Amount of Each Disbursement this Period <b>65.08</b>
Purpose of Disbursement <b>(409)Meal for Volunteers</b>	Category/Type	<b>MEMO</b>
Candidate Name		<b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

Full Name (Last, First, Middle Initial) <b>C. The Home Depot</b>		Transaction ID: D21-03IT02 Date of Disbursement
Mailing Address <b>5900 Southwest Huntoon</b>		<input type="checkbox"/> 01 / <input type="checkbox"/> 02 / <input type="checkbox"/> 2008
City State Zip Code <b>Topeka KS 66600</b>		Amount of Each Disbursement this Period <b>32.20</b>
Purpose of Disbursement <b>(409)Supplies</b>	Category/Type	<b>MEMO</b>
Candidate Name		<b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	<b>0</b>
TOTAL This Period (last page this line number only) .....	<b>0</b>

28020180852



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Ruth's Chris Steak House</b>		Transaction ID: <b>D10-03XM01</b>
Mailing Address <b>2100 W End Ave.</b>		Date of Disbursement MM / DD / YYYY <b>01 / 11 / 2008</b>
City <b>Nashville</b>	State <b>TN</b>	Zip Code <b>37203</b>
Purpose of Disbursement <b>(410)Travel-Meals</b>	Category/ Type	Amount of Each Disbursement this Period <b>165.36</b>
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>
Office Sought: State:      District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>B. The Ivy</b>		Transaction ID: <b>D13-03XJ01</b>
Mailing Address <b>113 North Robertson Blvd.</b>		Date of Disbursement MM / DD / YYYY <b>01 / 11 / 2008</b>
City <b>Los Angeles</b>	State <b>CA</b>	Zip Code <b>90048</b>
Purpose of Disbursement <b>(410)Travel-Meal Exp</b>	Category/ Type	Amount of Each Disbursement this Period <b>74.68</b>
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>
Office Sought: State:      District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>C. The Paradies Shop</b>		Transaction ID: <b>D14-03XL01</b>
Mailing Address <b>Ronald Reagan Washington Natl Airp</b>		Date of Disbursement MM / DD / YYYY <b>01 / 11 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20001</b>
Purpose of Disbursement <b>(410)Travel-Meal</b>	Category/ Type	Amount of Each Disbursement this Period <b>7.30</b>
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>
Office Sought: State:      District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....	<b>0.00</b>
TOTAL This Period (last page this line number only) .....	<b>142.88</b>

2802010085A

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

Full Name (Last, First, Middle Initial) <b>A. House of Arnold Florist</b>		Transaction ID: D8-03XX01 Date of Disbursement: 01/18/2008
Mailing Address 4109 Annapolis Rd		Amount of Each Disbursement this Period 64.50
City Baltimore	State MD	
Purpose of Disbursement (411)Flowers	Zip Code 21227	MEMO Credit Card Item
Candidate Name	Category/Type	
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>B. McFarlands Restaurant</b>		Transaction ID: D10-03PX03 Date of Disbursement: 01/18/2008
Mailing Address 4133 SW Gage Center		Amount of Each Disbursement this Period 22.02
City Topeka	State KS	
Purpose of Disbursement (411)Meeting/Meal	Zip Code 66604	MEMO Credit Card Item
Candidate Name	Category/Type	
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>C. Postmaster</b>		Transaction ID: D17-03XW01 Date of Disbursement: 01/18/2008
Mailing Address		Amount of Each Disbursement this Period 8.27
City Gordonsville	State VA	
Purpose of Disbursement (411)Postage	Zip Code	MEMO Credit Card Item
Candidate Name	Category/Type	
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....	0.00
TOTAL This Period (last page this line number only) .....	142.88

28020100854

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
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Full Name (Last, First, Middle Initial) <b>A. Starbucks</b>		Transaction ID: <b>D20-03XZ01</b>
Mailing Address <b>7th &amp; Massachuset</b>		Date of Disbursement <b>01 / 18 / 2008</b>
City <b>Lawrence</b>	State <b>KS</b>	Zip Code <b>66044</b>
Purpose of Disbursement <b>(411)Meeting/Drink Exp</b>	<input type="checkbox"/>	Amount of Each Disbursement this Period <b>3.54</b>
Candidate Name	<b>Category/ Type</b>	<b>MEMO</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Price, Erica</b>		Transaction ID: <b>D2151-03YK01</b>
Mailing Address <b>4000 SE Shawnee Heights</b>		Date of Disbursement <b>02 / 06 / 2008</b>
City <b>Tecumseh</b>	State <b>KS</b>	Zip Code <b>66542</b>
Purpose of Disbursement <b>Tip for Pancake FR Breakf</b>	<input type="checkbox"/>	Amount of Each Disbursement this Period <b>50.00</b>
Candidate Name	<b>Category/ Type</b>	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. DCA Venture Cibo Bis,</b>		Transaction ID: <b>D3-03YQ01</b>
Mailing Address		Date of Disbursement <b>02 / 12 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code
Purpose of Disbursement <b>(412)Food-Meal Exp</b>	<input type="checkbox"/>	Amount of Each Disbursement this Period <b>11.53</b>
Candidate Name	<b>Category/ Type</b>	<b>MEMO</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>50.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>192.88</b>

20020180855

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
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Full Name (Last, First, Middle Initial) <b>A. Embassy Suites</b>		Transaction ID: <b>D4-03YO01</b>
Mailing Address <b>Orlando Downtown, 191 East Pine Street</b>		Date of Disbursement MM / DD / YYYY <b>02 / 12 / 2008</b>
City <b>Orlando</b>	State <b>FL</b>	Amount of Each Disbursement this Period <b>177.74</b>
Zip Code <b>32801</b>	Category/Type <input type="checkbox"/>	
Purpose of Disbursement <b>(412)Travel-Lodging</b>		<b>MEMO</b> <b>Credit Card Item</b>
Candidate Name		
Office Sought: State: <input type="checkbox"/> District: <input type="checkbox"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>B. Flowers on Fourteenth</b>		Transaction ID: <b>D5-03YN01</b>
Mailing Address <b>1718A 14th Street NW</b>		Date of Disbursement MM / DD / YYYY <b>02 / 12 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Amount of Each Disbursement this Period <b>66.57</b>
Zip Code <b>20009</b>	Category/Type <input type="checkbox"/>	
Purpose of Disbursement <b>(412)Flowers</b>		<b>MEMO</b> <b>Credit Card Item</b>
Candidate Name		
Office Sought: State: <input type="checkbox"/> District: <input type="checkbox"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>C. Hmshost-Ict-Air</b>		Transaction ID: <b>D7-039Z02</b>
Mailing Address		Date of Disbursement MM / DD / YYYY <b>02 / 12 / 2008</b>
City <b>Wichita</b>	State <b>KS</b>	Amount of Each Disbursement this Period <b>16.29</b>
Zip Code	Category/Type <input type="checkbox"/>	
Purpose of Disbursement <b>(412)Meal Expense</b>		<b>MEMO</b> <b>Credit Card Item</b>
Candidate Name		
Office Sought: State: <input type="checkbox"/> District: <input type="checkbox"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....	<b>0.00</b>
TOTAL This Period (last page this line number only) .....	<b>192.88</b>

28020180857

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Sam Adams DC Brewhouse</b>		Transaction ID: <b>D9-03YR01</b>
Mailing Address		Date of Disbursement MM / DD / YYYY <b>02 / 12 / 2008</b>
City <b>Washington</b>	State <b>DC</b>	Amount of Each Disbursement this Period <b>15.60</b>
Purpose of Disbursement <b>(412)Meal Expense</b>	Category/ Type	<b>MEMO</b>
Candidate Name		<b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Deer Park</b>		Transaction ID: <b>D959-03YM01</b>
Mailing Address <b>Processing Center, P.O. Box 856192</b>		Date of Disbursement MM / DD / YYYY <b>02 / 12 / 2008</b>
City <b>Louisville</b>	State <b>KY</b>	Amount of Each Disbursement this Period <b>69.98</b>
Purpose of Disbursement <b>Coffee Service</b>	Category/ Type	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Kansas Medical Society</b>		Transaction ID: <b>D1500-028R02</b>
Mailing Address <b>623 SW 10th Ave.</b>		Date of Disbursement MM / DD / YYYY <b>02 / 12 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Amount of Each Disbursement this Period <b>77.04</b>
Purpose of Disbursement <b>Supplies-Labels for Mail</b>	Category/ Type	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>147.02</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>339.90</b>

26020180858

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. Best Western Country Inn</b>		Transaction ID: <b>D3-03Yv01</b> Date of Disbursement
Mailing Address <b>506 N 14th</b>		<b>02 / 15 / 2008</b>
City <b>Dodge City</b>	State <b>KS</b>	Zip Code <b>67801</b>
Purpose of Disbursement <b>(413)Travel-Lodging</b>	<input type="checkbox"/>	Amount of Each Disbursement this Period <b>102.54</b>
Candidate Name	<b>MEMO</b>	<b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Brick Oven</b>		Transaction ID: <b>D4-03Sw02</b> Date of Disbursement
Mailing Address		<b>02 / 15 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Zip Code
Purpose of Disbursement <b>(413)Meal Expense</b>	<input type="checkbox"/>	Amount of Each Disbursement this Period <b>67.97</b>
Candidate Name	<b>MEMO</b>	<b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Dillons</b>		Transaction ID: <b>D7-03Yw01</b> Date of Disbursement
Mailing Address <b>2815 W. 29th St</b>		<b>02 / 15 / 2008</b>
City <b>Topeka</b>	State <b>KS</b>	Zip Code
Purpose of Disbursement <b>(413)Food-Pancake Feed</b>	<input type="checkbox"/>	Amount of Each Disbursement this Period <b>21.39</b>
Candidate Name	<b>MEMO</b>	<b>Credit Card Item</b>
Office Sought:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	<b>0.00</b>
TOTAL This Period (last page this line number only) .....	<b>339.90</b>

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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17     18     19a  
20a    20b    20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. Interpark</b>		Transaction ID: D17-03Yt01
Mailing Address 1145 19th NW		Date of Disbursement MM / DD / YYYY 02 / 15 / 2008
City Washington	State DC	Zip Code 20036
Purpose of Disbursement (413)Meeting Exp	Category/ Type	Amount of Each Disbursement this Period 12.00
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:      District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. Kansas State Surplus Property</b>		Transaction ID: D18-03Su02
Mailing Address 2904 SW Kanza Drive		Date of Disbursement MM / DD / YYYY 02 / 15 / 2008
City Topeka	State KS	Zip Code 66606
Purpose of Disbursement (413)Office Furniture	Category/ Type	Amount of Each Disbursement this Period 95.63
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:      District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>C. McAfee Com</b>		Transaction ID: D20-038N02
Mailing Address		Date of Disbursement MM / DD / YYYY 02 / 15 / 2008
City	State CA	Zip Code
Purpose of Disbursement (413)Virus Protection	Category/ Type	Amount of Each Disbursement this Period 74.75
Candidate Name		<b>MEMO</b> <b>Credit Card Item</b>
Office Sought:	Disbursement For:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:      District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

SUBTOTAL of Disbursements This Page (optional) .....	0.00
TOTAL This Period (last page this line number only) .....	339.90

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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17 20a     18 20b     19a 20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

**A. Michaels #4725**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Mailing Address  
3106 Iowa Street Ste. 210  
City State Zip Code  
Lawrence KS 66046

Purpose of Disbursement  
(413)Supplies for Event

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_ Disbursement For:  
 Primary     General  
 Other (specify): ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID: D22-03Yo01  
Date of Disbursement: 02 / 15 / 2008

Amount of Each Disbursement this Period: 17.16

**MEMO**  
**Credit Card Item**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**B. Peacock Grand Cafe**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Mailing Address  
2020 K Street, NW  
City State Zip Code  
Washington DC 20006

Purpose of Disbursement  
(413)Campaign Lunch Exp

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_ Disbursement For:  
 Primary     General  
 Other (specify): ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID: D27-03Ys01  
Date of Disbursement: 02 / 15 / 2008

Amount of Each Disbursement this Period: 108.75

**MEMO**  
**Credit Card Item**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**C. Postmaster**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Mailing Address  
Jefferson Manor Post Office  
City State Zip Code  
Alexandria VA \_\_\_\_\_

Purpose of Disbursement  
(413)Postage

Candidate Name \_\_\_\_\_

Office Sought: \_\_\_\_\_ Disbursement For:  
 Primary     General  
 Other (specify): ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID: D29-038102  
Date of Disbursement: 02 / 15 / 2008

Amount of Each Disbursement this Period: 18.73

**MEMO**  
**Credit Card Item**

Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

**TOTAL** This Period (last page this line number only) ..... 339.90

200201808602

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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20a    20b    20c     21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. Red Robin Restaurant</b>		Transaction ID: D30-032L02
Mailing Address 6230 SW 6TH Street		Date of Disbursement MM/DD/YYYY 02 / 15 / 2008
City Topeka	State KS	Zip Code 66615
Purpose of Disbursement (413)Meal/Meeting Exp		Amount of Each Disbursement this Period 92.05
Candidate Name		<b>MEMO</b>
Office Sought:		<b>Credit Card Item</b>
State:	District:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

Full Name (Last, First, Middle Initial) <b>B. The Majestic</b>		Transaction ID: D33-03Yu01
Mailing Address 911 King St		Date of Disbursement MM/DD/YYYY 02 / 15 / 2008
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement (413)Meeting/Meal Exp		Amount of Each Disbursement this Period 72.53
Candidate Name		<b>MEMO</b>
Office Sought:		<b>Credit Card Item</b>
State:	District:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

Full Name (Last, First, Middle Initial) <b>C. Walgreens</b>		Transaction ID: D36-01NV08
Mailing Address 1001 SW Topeka Blvd		Date of Disbursement MM/DD/YYYY 02 / 15 / 2008
City Topeka	State KS	Zip Code 66600
Purpose of Disbursement (413)Office Supplies		Amount of Each Disbursement this Period 5.36
Candidate Name		<b>MEMO</b>
Office Sought:		<b>Credit Card Item</b>
State:	District:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional) .....	0.00
TOTAL This Period (last page this line number only) .....	339.90

20020180803

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE**      C00128876

Full Name (Last, First, Middle Initial) <b>A. Whelan's Main Yard,</b>			Transaction ID: D38-03K902		
Mailing Address 715 SE 4th Street			Date of Disbursement MM / DD / YYYY 02 / 15 / 2008		
City Topeka	State KS	Zip Code 66607	Amount of Each Disbursement this Period 10.83		
Purpose of Disbursement (413)Supplies for Banner		Category/ Type	MEMO See memo entries <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
Candidate Name					
Office Sought:	Disbursement For:				
State:      District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼				

Full Name (Last, First, Middle Initial) <b>B. Woomi Kyoto Shushi</b>			Transaction ID: D39-03Yq01		
Mailing Address 201 Massachusetts Ave			Date of Disbursement MM / DD / YYYY 02 / 15 / 2008		
City Washington	State DC	Zip Code 20002	Amount of Each Disbursement this Period 53.32		
Purpose of Disbursement (413)Meal/Food		Category/ Type	MEMO Credit Card Item <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
Candidate Name					
Office Sought:	Disbursement For:				
State:      District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼				

Full Name (Last, First, Middle Initial) <b>C. Republican Roundtable</b>			Transaction ID: D2299-03Ze01		
Mailing Address P.O. Box 1495			Date of Disbursement MM / DD / YYYY 02 / 28 / 2008		
City Topeka	State KS	Zip Code 66601	Amount of Each Disbursement this Period 30.00		
Purpose of Disbursement Membership Dues		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53		
Candidate Name					
Office Sought:	Disbursement For:				
State:      District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼				

SUBTOTAL of Disbursements This Page (optional) .....	30.00
TOTAL This Period (last page this line number only) .....	369.90

28020180864



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
--	------------------

Full Name (Last, First, Middle Initial) <b>A. QuikTrip #00369</b>		Transaction ID: <b>D10-03Zs01</b>
Mailing Address <b>3216 East Harry</b>		Date of Disbursement MM / DD / YYYY <b>03 / 07 / 2008</b>
City <b>Wichita</b>	State <b>KS</b>	Zip Code
Purpose of Disbursement <b>(414)Travel-Fuel</b>	Category/ Type	Amount of Each Disbursement this Period <b>6.78</b>
Candidate Name	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<b>MEMO</b> <b>Credit Card Item</b> <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. Starbucks USA</b>		Transaction ID: <b>D11-03Zt01</b>
Mailing Address		Date of Disbursement MM / DD / YYYY <b>03 / 07 / 2008</b>
City <b>Emporia</b>	State <b>KS</b>	Zip Code
Purpose of Disbursement <b>(414)Travel-Meal</b>	Category/ Type	Amount of Each Disbursement this Period <b>15.91</b>
Candidate Name	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<b>MEMO</b> <b>Credit Card Item</b> <input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>C. Garnett Publishing, Inc.</b>		Transaction ID: <b>D1209-03a801</b>
Mailing Address <b>P.O. Box 409, 112 West 6th</b>		Date of Disbursement MM / DD / YYYY <b>03 / 14 / 2008</b>
City <b>Garnett</b>	State <b>KS</b>	Zip Code <b>66032</b>
Purpose of Disbursement <b>Townhall Meeting Ads</b>	Category/ Type	Amount of Each Disbursement this Period <b>45.00</b>
Candidate Name	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Office Sought: State: _____ District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>45.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>414.90</b>

2008012000

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 21
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NAME OF COMMITTEE (in Full) <b>PAT ROBERTS FOR SENATE</b>	<b>C00128876</b>
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Full Name (Last, First, Middle Initial) <b>A. The Anderson County Advocate</b>		Transaction ID: <b>D2710-03a901</b> Date of Disbursement
Mailing Address <b>PO Box 403</b>		<input type="checkbox"/> M / <input type="checkbox"/> D / <input type="checkbox"/> Y <b>03 / 14 / 2008</b>
City <b>Garnett</b>	State <b>KS</b>	Zip Code <b>66032</b>
Purpose of Disbursement <b>Townhall Meeting Ads</b>	Category/ Type <b>22Y</b>	Amount of Each Disbursement this Period <b>122.91</b>
Candidate Name	Office Sought:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

Full Name (Last, First, Middle Initial) <b>B. The Madison News, Inc.</b>		Transaction ID: <b>D2740-03aA01</b> Date of Disbursement
Mailing Address <b>PO Box 217</b>		<input type="checkbox"/> M / <input type="checkbox"/> D / <input type="checkbox"/> Y <b>03 / 14 / 2008</b>
City <b>Madison</b>	State <b>KS</b>	Zip Code <b>66860</b>
Purpose of Disbursement <b>Townhall Meeting Ads</b>	Category/ Type	Amount of Each Disbursement this Period <b>54.00</b>
Candidate Name	Office Sought:	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
State:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): ▼	

SUBTOTAL of Disbursements This Page (optional) .....	<b>176.91</b>
TOTAL This Period (last page this line number only) .....	<b>591.81</b>

28020180857

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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 19a  
 20c  
 21

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NAME OF COMMITTEE (in Full) **PAT ROBERTS FOR SENATE** C00128876

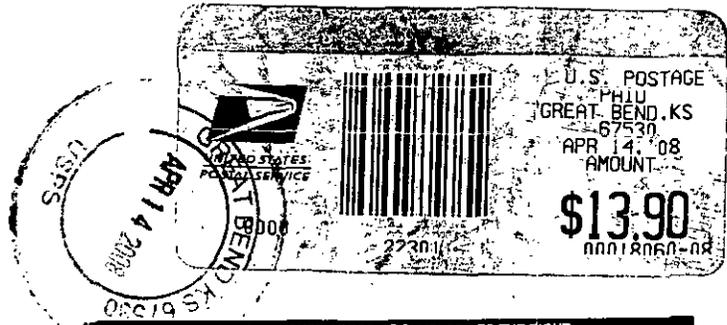
Full Name (Last, First, Middle Initial) <b>A. Tenpenny, Tricia</b>		Transaction ID: D2704-02Lr02	
Mailing Address 21612 W. 99th Ter		Date of Disbursement MM / DD / YYYY 03 / 19 / 2008	
City Lenexa	State KS	Zip Code 66220	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Refund Contribution		Category/ Type 22Y	<input type="checkbox"/> Refund or Disposal of Excessive Contributions Required under 11 C.F.R. 400.53
Candidate Name			
Office Sought:	Disbursement For:		
State: <input type="checkbox"/>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
District: <input type="checkbox"/>	<input type="checkbox"/> Other (specify): ▼		

28020180808

SUBTOTAL of Disbursements This Page (optional) .....	500.00
TOTAL This Period (last page this line number only) .....	500.00

T ROBERTS FOR US SENATE  
BOX 433  
GREAT BEND, KS 67530-0433

**RETURN RECEIPT  
REQUESTED**



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE  
**CERTIFIED MAIL**

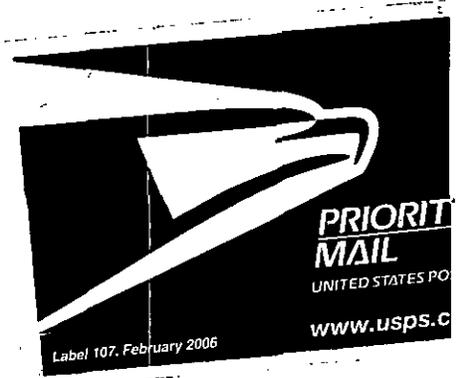


7006 2760 0004 8189 7986

**X-RAYED  
IN THE SENATE  
POST OFFICE**

SECRETARY OF THE SENATE  
OFFICE OF PUBLIC RECORDS  
PO BOX 5109  
ALEXANDRIA, VA 22301-0109

**RETURN RECEIPT  
REQUESTED**



28020180869

NANCY ERICKSON  
SECRETARY

PAMELA B. GAVIN  
SUPERINTENDENT

HART SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-7118  
PHONE: (202) 224-0322

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_

Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_

Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_

04-14-08

Postmark

USPS PRIORITY MAIL \_\_\_\_\_

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS \_\_\_\_\_

UPS \_\_\_\_\_

DHL \_\_\_\_\_

AIRBORNE EXPRESS \_\_\_\_\_

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX \_\_\_\_\_

Date of Receipt

OTHER \_\_\_\_\_

Date of Receipt or Postmark

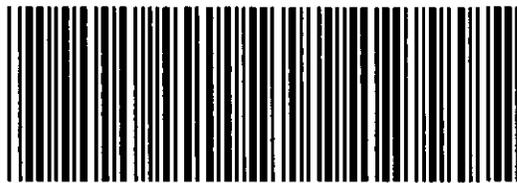
PREPARER

RD

DATE PREPARED

04.18.08

01000100070



28020180871